REQUEST FOR BUDGET INCREASE COVER LETTER

Please submit with the Budget Appeal Form.

READ: IMPORTANT INFORMATION AND REQUIREMENTS FOR COMPLETING THIS FORM
EFFECTIVE IMMEDIATELY

The Office of Student Financial Services has made several important changes to the budget appeal process. These changes have been initiated on the advice of upper level NYU Administration and are the product of a thorough policy and regulatory federal analysis.

The following expenses will no longer be used to increase the student budget:

- Car Expenses/Rentals/Parking/Cab Fares
- Credit Card Debt
- Moving Expenses (Security Deposits)
- Entertainment
- Club Dues and Activity Fees
- Furniture
- Job Search Expenses
- Child Support Payments
- Wardrobe Expenses
- Spousal/Dependent Expenses
- Conferences (Match Programs)
- Medical Expenses not covered by health insurance for services rendered before the academic period.
- NERB/WREB/National Board

Please note that requests for budget increases may be reduced or even denied based on the Assistant Director and/or Manager’s discretion. The financial aid office may exercise professional judgment to adjust for other reasonable expenses. The office will determine required documentation.

__________________________________________  ________________
Student Signature                                Date

Revised June 2, 2015
NYUCD recognizes that a student’s total expenses for the academic year may exceed the NYU standard cost of attendance. This appeal form allows the Office of Student Financial Services to examine selected education related expenses and evaluate your option for additional loan funding.

The Office of Student Financial Services will review this request within 3-4 weeks. Decisions are based upon your provided documentation and are directed by administrative parameters previously established by New York University. All decisions are reviewed by a Committee and are final. Incomplete requests will not be processed until all supporting documentation is received. You may obtain your decision results by viewing your record on NYU Albert at albert.nyu.edu.

1. Please check one:
   - Fall only _________
   - Spring only _________
   - Fall/Spring _________

2. Please itemize below your additional budgetary needs, apart from the normal amount for tuition and fees. If you need more space, or to further explain your circumstance, please attach a separate sheet of paper (include your name and University I.D. on all sheets).

<table>
<thead>
<tr>
<th>Budget Item</th>
<th>Monthly $ Amount (where applicable)</th>
<th>Total $ Amount (for entire period indicated in #1 above)</th>
<th>Documentation*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Room and Board</td>
<td></td>
<td></td>
<td>Copy of Signed Lease, Copy of Utility Bills, and Food Receipts</td>
</tr>
<tr>
<td>Computer (Note: Only one purchase per degree)</td>
<td></td>
<td></td>
<td>Receipt/Copy of Bill</td>
</tr>
<tr>
<td>Other</td>
<td></td>
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<td>Other</td>
<td></td>
<td></td>
<td>Receipt/Copy of Bill</td>
</tr>
</tbody>
</table>

3. If your budget appeal is approved, it will not automatically increase your financial aid. If approved and your budget allows for additional loans, please indicate if you want NYU to suggest these loans and send a revised award letter to you (Federal loans will be suggested first, if you are eligible):
   - YES, please suggest loans based on my new eligibility. (Note that you must apply for the additional loan. Instructions will accompany your financial aid award letter. If you do not want the suggested loan, you may disregard the application instructions.)
   - NO, please adjust my budget, but do not suggest additional loans.

You confirm that all the information on this form is true and accurate to the best of your knowledge. The penalty for intentionally giving false information may include the forfeiture and return of any funds received.

___________________________________________________________  ______________________________
Student Signature  Date

Documentation must be provided for all claimed items. Additional information may be requested at a later date. A Budget Appeal Cover Sheet is required. Please submit this form with appropriate documentation (include your University I.D. number on all pages) by one of the following:

<table>
<thead>
<tr>
<th>MAIL/IN PERSON</th>
<th>FAX</th>
<th>SCAN/EMAIL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Office of Student Financial Services</td>
<td>212-995-4240</td>
<td><a href="mailto:dental.financial.aid@nyu.edu">dental.financial.aid@nyu.edu</a></td>
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</tbody>
</table>