### WILLIAM S BOYD SCHOOL OF LAW STUDENTS

#### 2016 - 2017 Cost of Attendance Appeal Form

**A. STUDENT INFORMATION**

<table>
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<th>Student name:</th>
<th>NSHE student ID:</th>
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**B. INFORMATION**

The Financial Aid and Scholarships (FAS) office recognizes that situations may arise in which a student’s total expenses for the academic year exceed the standard cost of attendance. FAS is sensitive to the current financial challenges that students face; however, we can only consider direct costs associated with supporting the student’s education, and will not be able to make allowances for items already accounted for in a student’s cost of attendance budget. Additionally, we cannot consider costs which you incur that are not directly associated with your academic pursuits. This appeal form allows FAS to examine selected education related expenses and evaluate options for additional funding.

Submit copies of documentation. Incomplete appeals or delays in submission of requested documentation may result in denial of appeal. Notification of the decision will be via Rebel Mail within 4 weeks of the receipt of the completed appeal.

**C. For Which Semester(s) Do You Want Your Costs Reviewed (Choose One Option)**

- [ ] Fall 2016 & Spring 2017
- [ ] Fall 2016 Only
- [ ] Spring 2017 Only
- [ ] Summer 2017 Only – appeals accepted only after Summer aid has been awarded
- [ ] Fall 2016, Spring 2017 & Summer 2017 – appeals accepted only after Summer aid has been awarded

**D. LETTER OF APPEAL**

Prepare a written statement requesting a cost of attendance review. Your letter must include:

1. Why you are requesting a cost of attendance review;
2. Reason(s) you are unable to meet your current expenses and financial obligations, including any change to your financial circumstances;
3. How these expenses pertain to your education.

**E. AMOUNT REQUESTED AND TYPE OF AID REQUESTED**

If your cost of attendance is increased, you will be eligible for additional loan funding. Please note it is your responsibility to apply for and be approved for the Federal PLUS and/or Alternative/Private loan amounts.

Please indicate the type(s) of loan you are requesting:

- [ ] Unsubsidized Loan
- [ ] Graduate Plus Loan (an additional credit check may be required)
- [ ] Alternative/Private Loans

Please indicate the additional amount of loan funding you are requesting: $____________________________

**F. CERTIFICATION**

By signing below, I certify that the information provided on this application and supporting documentation is true to the best of my knowledge. I understand that omissions or misrepresentations will invalidate appeal for special consideration. Additionally, I understand that if the circumstances that warranted the appeal request change, it is my responsibility to immediately notify the Financial Aid & Scholarships Office. Failure to do so may limit my ability to be considered for future appeals.

I understand that my signature certifies this information is true and accurate. I understand that any discrepant information found as a result of verification will be cause for the denial, reduction and/or repayment of financial aid. I also understand that giving false or misleading information may result in fines up to $20,000, criminal conviction, or both.

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<th>Student Signature</th>
<th>Date</th>
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