

The Office of Student Financial Aid may be able to provide you with additional financial aid for the costs of completing a rotation at another institution that are not included in your Cost of Attendance (COA). Typically, these expenses might include travel, room & board, and the cost of tuition. An offer of additional aid is not guaranteed. Each adjustment is reviewed on a case-by-case basis.

You must submit proof of the expenses and payment made by you or someone whose income is included in your FAFSA in order to be granted an increase to your COA. You will be notified in writing (e-mail) of the outcome of the request. Please allow three weeks for processing.

COA increase requests should be submitted no later than 45 days before your last date of attendance. Please refer to the [Cost of Attendance Adjustment Policy](#) on our website for more information about COA adjustments. Some expenses are already built into the monthly budget. For details visit [here](#).

_____	_____	\$ _____
STUDENT NAME	7-DIGIT STUDENT ID	AMOUNT REQUESTED

INFORMATION ABOUT ROTATION(S)

Location 1: _____	Course Dates: _____	Travel Dates: _____
Location 2: _____	Course Dates: _____	Travel Dates: _____
Location 3: _____	Course Dates: _____	Travel Dates: _____

PAYMENT INFORMATION

Location 1

Type of expense: _____	Date of purchase: _____	Payment method: _____
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I have attached proof of purchase for this expense

Type of expense: _____	Date of purchase: _____	Payment method: _____
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I have attached proof of purchase for this expense

Type of expense: _____	Date of purchase: _____	Payment method: _____
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I have attached proof of purchase for this expense

Location 2

Type of expense: _____ Date of purchase: _____ Payment method: _____

I have attached proof of purchase for this expense

Type of expense: _____ Date of purchase: _____ Payment method: _____

I have attached proof of purchase for this expense

Type of expense: _____ Date of purchase: _____ Payment method: _____

I have attached proof of purchase for this expense

Location 3

Type of expense: _____ Date of purchase: _____ Payment method: _____

I have attached proof of purchase for this expense

Type of expense: _____ Date of purchase: _____ Payment method: _____

I have attached proof of purchase for this expense

Type of expense: _____ Date of purchase: _____ Payment method: _____

I have attached proof of purchase for this expense

Please submit additional copies if more spaces are needed.

Please check the boxes below, indicating that you have read and agree to the following:

I have submitted all required documentation and understand that the Student Financial Aid Office will revise my award, if appropriate, after the appeal has been processed.

- I understand that submission of the document does not guarantee a change in my financial aid award.
- I understand that I will receive an email notifying me of any change in my Cost of Attendance once this appeal has been processed.

To protect your information, we ask that all documentation be sent confidentially using your KUMC.EDU email address. To send a secure email, place a [secure] at the beginning of the subject line in your email. More information can be found at this site: <https://kumed.sharepoint.com/sites/mykumc/ir/Pages/Secure-Email.aspx>

All students must sign and date:

I attest to the accuracy of the information provided in this document.

STUDENT SIGNATURE

DATE

For Department Use Only:

Budget Maint. _____	Award Entry _____	Date complete _____
Email _____	Comment _____	Completed by _____

Office of Student Financial Aid

3901 Rainbow Blvd. | Mail Stop 4005 | Kansas City, KS 66160 | financialaid@kumc.edu | 913-588-5170 (P) | 913-588-8841 (F)