

Student's Name: \_\_\_\_\_

Student ID #: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Phone Number: \_\_\_\_\_ OCU email: \_\_\_\_\_

**Check the circumstance(s) that best describes your request.**

- Computer Allowance**
  - **Major:** \_\_\_\_\_ [nursing (juniors & seniors) and music students not eligible]
  - **Must attach a price quote or sales receipt**
  
- Childcare cost**
  - **Must attach a signed billing statement on company letterhead from your OKDHS licensed childcare provider; include the name(s) and age(s) of all children and dates/times of service, and contact info and address of provider. Contact info must include phone number and email address.**
  
- Additional transportation costs**
  - **Commuter expenses for school related travel *outside* the Oklahoma City Metro area in excess of budgeted transportation expenses.**
  - **Must attach all:**
    - Proof of address** (examples: utility bill, voter id, lease agreement, mortgage payment stub)
    - A map showing mileage**
    - A copy of class schedule**
    - A statement of number of days you travel to class each week**
  
- Other Educational Expense**
  - **Brief description of request:** \_\_\_\_\_
  - **Must attach detailed supporting documentation and receipts.**

**CERTIFICATION**

All of the information on this form is true and complete to the best of my knowledge and the attached documents are true and accurate.

**I acknowledge that I understand that this requests a budget adjustment only. If approved, funding for these items will be limited to a *loan* offer subject to my eligibility for educational loans.**

\_\_\_\_\_  
Student Signature

Date \_\_\_\_/\_\_\_\_/\_\_\_\_

**ALLOW 30 DAYS FOR APPLICATION RESULTS.**

**OFFICIAL USE ONLY**

Action: \_\_\_\_\_ Comments: \_\_\_\_\_

Amount(s) approved: \_\_\_\_\_ Award Year: \_\_\_\_\_

Counselor Signature: \_\_\_\_\_ Date: \_\_\_\_\_