



**2021–2022 Academic Year
 Cost of Attendance Appeal Form
 BYU–Hawaii Financial Aid & Scholarships**

**Cost of Attendance
 Appeal**

Part 1 – Student Information

Student Name: _____ ID#: _____

Email Address: _____ Phone: _____

Marital Status: Single Married/Remarried Separated Divorced/ Widowed

Part 2 – Cost of Attendance Information

Check the appropriate term that you would like to submit this appeal for Cost of Attendance.

Semester: Fall, 2021 Winter, 2022 Spring, 2022

Please note the following:

- Before completing this form, please review the Cost of Attendance for your program on the BYUH website: https://financialaid.byuh.edu/cost_of_attendance
- You are not required to complete the COA Appeal Request Form if your expenses do not exceed your cost of attendance.
- All expenses listed on this form must be supported by appropriate documentation. **Expenses listed without supporting documentation will not be considered.**

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| <p>\$ _____ Room and Board Attach a copy of lease/mortgage statements, utility and food/grocery receipts. Expenses must exceed your living allowance standard for your cost of attendance.</p> |
| <p>\$ _____ Transportation Expenses Attach a copy of receipts. Expenses must exceed your living allowance standard for your cost of attendance. Ineligible expenses include purchase of car, auto loan payments or insurance.</p> |
| <p>\$ _____ One-Time Computer Purchase Attach a copy of receipts for the purchase of a personal computer, laptop, printer, or required software product. Receipt should be in your name from the place of purchase with the itemized components and costs.</p> |
| <p>\$ _____ Other Miscellaneous Education Related Expenses Attach a copy of receipts for other miscellaneous purchases along with explanation of expense.</p> |

Part 3 – Support Documentation

Appeal request exceptions to the BYU-H cost of attendance policy require the following:

1. Appeal Form
2. Copy of your current academic plan.
3. Written explanation of circumstances and purpose of request.

Part 4 – Certification

This is a true and accurate reflection of my additional expenses for my cost of attendance at Brigham Young University–Hawaii. I understand that I may be required to provide additional information and documentation as necessary. My signature below affirms that the information provided above and the supportive documentation are true and accurate to the best of my knowledge. I understand that providing false information can result in the cancellation of financial aid. I understand that approval of the request for additional COA funds does not guarantee receipt of additional loan proceeds.

Student Signature: _____ Date: _____

FA Counselor: _____ Date: _____

Committee Review Date: _____ Decision: Conditional Approval Approved Denied

Signature: _____ Signature: _____ Signature: _____

Signature: _____ Signature: _____ Signature: _____

Final Review: _____ Date: _____