



Office of Student Financial Aid

Year: \_\_\_\_\_

Emergency Expenditure Request for Miscellaneous Expenses

Student Name

HSC ID Number R

Budget adjustments may be considered for educationally related expenses, or for expenses that directly impact the student's ability to continue his/her program of study. Students applying for Emergency Funds must have a FAFSA submitted to the TTUHSC El Paso Office of Financial Aid, and must have utilized their full subsidized loan eligibility. Increasing your financial aid budget may enable you to receive additional self-help aid (typically federal or private loans). This adjustment does not change your federal FAFSA data.

Check any of the following that apply to your expenses and submit all documentation (receipts, etc.)

**Additional Educational Supplies and/or Tuition** Amount Requested \$ \_\_\_\_\_

Include documentation showing amount(s) paid for items. Only expenses incurred in the current academic year will be considered. The standard budget includes an estimated amount for books and supplies. Amounts spent in excess of the budgeted amount will be considered.

**Medical or Dental Expenses (not covered or reimbursed by insurance)** Amount Requested \$ \_\_\_\_\_

Include receipts, EOB's, or statements showing amount due or paid (not covered or reimbursed by insurance) or estimates for the expenses. Only expenses for the student or student's dependents can be submitted. Federal regulations do not allow spouse's expenses to be included.

**Required Car or Home Repairs (not covered or reimbursed by insurance)** Amount Requested \$ \_\_\_\_\_

Include documentation showing amount(s) paid or estimates for goods or services necessary for repairs. Expenses that will be considered are the student's expenses for the current academic year. Required repairs are those that are necessary for the student to continue their educational program. Standard maintenance expenses (oil change, lawn service, etc.) are not considered.

**Professional Licensing Expenses** Amount Requested \$ \_\_\_\_\_

Include documentation showing date of purchase and amount. Purchase must take place during the current academic program. Amounts that are to be paid after your program of study has ended cannot be included.

**Additional Information:**

1. Have you requested emergency funds in the past? \_\_\_\_\_
2. If so, when? \_\_\_\_\_

**Student Signature**

By signing below, I verify that the information on this form and in any attached documentation is true and complete. I understand the Office of Student Financial Aid may request additional documentation in order to process this request.

Student Signature \_\_\_\_\_ Date \_\_\_\_\_ Phone Number \_\_\_\_\_

<u>Office Use Only</u>		Total Amount Approved: _____
Comments:		
FA Advisor Signature	_____	Date: _____
Dean's Signature	_____	Date: _____