REQUEST FOR COST OF ATTENDANCE BUDGET INCREASE PROFESSIONAL EXAMLICENSING FEES

Student Name:	StudenNlimber:
You may request to increase your Cost of Attendance budget t licensing exams and fees paid out of pocket. This request ca certification, or professional credential required for your pro-	an include the cost of obtaining the license,
f The out of pocket expenses must be paid by you and Office no later than 30 days prior to your last day of c	·
f I tems that can be included in this request: licensing exact obtaining the license or certification (request cannot in the cannot be included in this request: licensing exact obtaining the license or certification (request cannot be included in this request: licensing exact obtaining the license or certification (request cannot be included in this request: licensing exact obtaining the license or certification (request cannot be included in this request: licensing exact obtaining the license or certification (request cannot be included in this request).	
Procedures:	
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I understand that by submitting this form I am requesting the Financia Attendance budget. I understand that this form is not a loan application contact the Financial Aid Office to discus so the options available to understand that misrepresentation of facts in connection with this or repayment of my financial aid so the connection of the connection with th	on and that it is my responsibility to me as a result of any budget increase. I also
Student Signature:	Date:

University of St. Thomas | Financial Aid Office, Mail 5007 | 2115 Summit Ave. | St. Paul, MN 55105 Phone: 651-962-6550 | Email Completed Document to: https://liquidfiles.stthomas.edu/filedrop/D1pTc -0.0IMs (e)-4.Alrection wi Summt5__