

**Special Circumstance:
2024-2025 Independent Student Budget Increase Request**

First Name: _____ Last Name: _____ Person Number: _____

Instructions:

Complete and submit through the Document Upload Center. Incomplete requests will delay processing.

Documentation Required:

1. Completed Budget Increase form
2. All relevant receipts and or invoices
3. Signed personal statement of why this increase is necessary.

Note: Submitting a Budget Increase does not guarantee approval and additional documentation may be required.

Student Information

First Name:	Last Name:	Person Number:
-------------	------------	----------------

Purpose:

I am requesting a budget increase for the following term (s):

Summer (deadline July 15)
 Fall (deadline November 15)
 Spring (Deadline April 15)

Standard Expenses: Select the expense(s) and write the dollar amount for which you are requesting an increase.

Emergency Car Repair		Books & Supplies	
Medical Insurance		Computer Purchase	
Transportation:		Disability Expenses	
Study Abroad		Housing:	
Origination Fees		Out-of-Pocket Medical	

Other Expenses: Please list other expenses you would like us to consider

Certification and Signature – Please handwrite your signature. Typed Signatures cannot be accepted.

I certify that all information provided in this document is true, complete, and accurate to the best of my knowledge. I attest that I have reviewed the standard COA for my academic level and have attached all required documentation. I further understand that any false statement or misrepresentation will be cause for denial, reduction, withdrawal, and/or repayment of financial aid. Also, purposely giving false or misleading information on this worksheet may lead to fines, jail sentences, or both. I authorize the University at Buffalo to make any change(s) necessary because of the updated information that I have provided.

Student Signature: _____ Date: _____
(Cannot be typed)

Legal First Name:	Legal Last Name:	Person Number:
Section 3: Expense Worksheet		
Instructions: To get a complete picture of your current expenses please complete this entire worksheet and submit with your Budget increase request. Write NA next to items that are not applicable.		
Housing related expenses		
• Do you leave on campus or Off campus.		\$
• If you live on campus, please list your rental charge per term.		
• If you live off campus, list your monthly housing payment and attach a copy of your lease or rental agreement.		\$
• Do you have a month-to-month tenancy?		
• Do you have a yearlong lease or rental agreement?		
Household Size		
• How many adults reside at your current address?		\$
• How many dependents reside at your current address?		\$
• How many adults are listed on the lease or rental agreement?		\$
• List all utilities included in your rent or lease.		\$
		\$
		\$
List Housing Related Expenses		
• Rental Insurance		\$
• Electric/Gas		\$
• Water		\$
• Landline		\$
• Cellular Plan		\$
• Cable		\$
• Streaming Services		\$
Transportation Expenses		
• Vehicle payments		\$
• Gasoline		\$
• Car maintenance (Inspection, registration etc.)		\$
• Auto Insurance		\$
Food and Medical Expenses		
• Groceries and Incidentals		\$
• Cleaning/Toiletries		\$
• School/Work Lunches		\$
• Medical Co pays		\$
• Life Insurance Premiums		\$
• Disability Insurance		\$
Additional Personal Expenses		
• Uniforms/ Clothing		\$
• Laundry/Dry Cleaning		\$
• Child Support -Paid		\$
• Pets Expenses		\$
• Print Subscriptions		\$
• Other:		\$