



Office of Student Financial Services · 8000 Utopia Parkway · Queens, NY 11439  
Phone: (718) 990-2000 Fax: (718) 990-5945

**St. John's University**  
**Office of Student Financial Services**  
2021-2022 Graduate Student Budget Appeal

The cost of attendance, also known as the budget, includes tuition, fees, books, supplies, and estimated personal living expenses. Federal regulations only permit increases to the budget for **educational-related expenses** incurred during the current academic year. Adjustments may take approximately 10 business days.

*The Office of Student Financial Services encourages students to evaluate loan options carefully, borrow only what is needed, and remember that loans must be repaid. Before completing this form, please visit the Department of Education's Loan Repayment Calculators at: <https://studentaid.gov/loan-simulator/repayment>*

Complete this form to request a review of your specific circumstances and an adjustment to your cost of attendance:

STUDENT NAME: \_\_\_\_\_ ID NUMBER X- \_\_\_\_\_

TELEPHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

ACADEMIC PERIOD (Circle One):      **SUMMER 2021**                      **FALL 2021 - SPRING 2022**

COMMON REASONS FOR REQUEST INCLUDE BUT ARE NOT LIMITED TO:

\_\_\_ OFF CAMPUS HOUSING  
The standard cost of attendance allows for **\$1987** per month in rent/mortgage for a student living off-campus. If your housing expenses exceed this figure, attach a signed copy of a full lease. **NOTE: YOUR NAME MUST APPEAR ON THE LEASE**

\_\_\_ TRANSPORTATION  
The standard cost of attendance allows for **\$115** per month in transportation expenses. If your monthly expenses exceed this figure, attach supporting documentation.

\_\_\_ COMPUTER PURCHASE  
Students are permitted a one-time adjustment to their cost of attendance for the purchase of a computer. **(Max. \$2000)** Attach a copy of the purchase invoice. Please note: accessories such as scanners, software, etc. WILL NOT be taken into consideration.

\_\_\_ CHILDCARE EXPENSES/DEPENDENT CARE  
Attach written statement from person or facility caring for your child/dependent along with copies of **three** cancelled checks. Dependent care expenses can be accommodated for periods of time including, but not limited to, class time, study time, field work, research, internships, commuting time, and other educational endeavors.

\_\_\_ OTHER EDUCATIONAL-RELATED EXPENSES  
Please attach a written statement to your documentation explaining the reason(s) for your request.

PLEASE READ AND SIGN

I certify that to the best of my knowledge the information given is complete and accurate. I understand that the Office of Student Financial Services may request additional documentation to support my request. I also realize that if I do not comply with the request for additional proof when asked, my request for a budget increase will not be processed.

\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Date

Please upload form to:  
<https://sftp.databankimx.com/form/StJohnsFinancialServicesDocumentSubmission>

OR Mail to:

St. John's University, P.O. Box 548, Randolph, MA 02368-0548