



2026-27 Cost of Attendance (COA) Adjustment Request

Use this form to request an adjustment to the standard cost of attendance. Only adjustments to standard costs accrued during the Summer 2026, Fall 2026, and/or Spring 2027 semesters will be considered. Requests will be reviewed for eligibility and compliance, and all adjustments are subject to office policy, aid program, and funding restrictions. Additional aid is not guaranteed.

Student's Name:	AQ ID:
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Check the box related to cost adjustment request.	Check the box related to documentation provided with this form and your detailed letter.
<input type="checkbox"/> Books and Supplies, Computer Purchase	<input type="checkbox"/> Receipts for required books and supplies showing store and purchase date. Course syllabus or letter from instructor(s) confirming requirement. <input type="checkbox"/> Receipt of computer purchase showing type/model, store, purchase date, and the cost. If you don't have a receipt, an estimate with a clear description, store, and cost may be accepted. This adjustment can only be used once while attending AQ.
<input type="checkbox"/> Housing	<input type="checkbox"/> Rental/lease agreement, and student must be listed as tenant or owner of property. (Utilities are not eligible.)
<input type="checkbox"/> Transportation	<input type="checkbox"/> Receipts for emergency car repairs in the student's name and paid by the student. Standard maintenance, gas, car payments, and insurance costs are not eligible
<input type="checkbox"/> Dependent Care	<input type="checkbox"/> Receipts and statement from dependent care provider. Must include provider name, contact information, and monthly costs. Also include dependent name(s), relationship to student, and months of care needed
<input type="checkbox"/> Other	<input type="checkbox"/> Documentation of other educational expenses during current enrollment. Note: Health insurance cost is already included in your standard cost of attendance and cannot be requested.

Please return the completed and signed form to the Financial Aid Office by mail or in person. Our contact information is listed at the top of this form. Return this form as soon as possible so that your financial aid will not be delayed.



Aquinas College Financial Aid Office, Hruby Hall
1700 Fulton St. E, Grand Rapids, MI 49506
Ph: 616.632.2893 • Fx: 616.732.4547 • financialaid@aquinas.edu

Please provide a detailed explanation of why you are requesting a COA increase and how it relates to your educational needs.

Certification and Signature(s)

I certify that the information provided in this request is accurate and that the expenses listed are necessary for my education. I understand that submitting this request does not guarantee approval and that I may be required to provide additional information.

Student's Handwritten Signature

Date

WARNING: If you purposely give false or misleading information, you may be fined, sent to prison, or both.

Office Use Only:

Request Received On:

Decision: Approved/Denied (circle one)

Received by:

Date:

Digitized by srujanika@gmail.com

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