Request to Increase Cost of Attendance 2026-2027 *(Fall 2026, Spring 2027, Summer 2027)*

Office of Financial Aid
UNIVERSITY OF COLORADO **BOULDER**

Name: _____ **ID:** _____
Student's Name (Last, First, M.I.) Student Identification Number (SID)

If approved, increases in the Cost of Attendance (also known as student budget) typically only allow the student or parent to borrow more loans.

1. Which term are you requesting a Cost of Attendance increase?

◯ Fall and spring ◯ Fall only ◯ Spring only ◯ Summer

2. Which of the following applies to your request? Check all that apply:

☐ **Above average on-campus housing expenses:** Your cost of attendance can be increased if your on-campus housing charges are more than the average cost of $20,682 we provided. On-campus housing includes the following residence halls.

☐ **Computer purchase** (maximum $2,000): The cost of attendance can be increased for the purchase of a computer, up to $2,000, during your attendance or within a reasonable period before classes begin. You must give us the estimated cost of your computer for this request to be considered. Include a photo of your shopping cart, hyperlink to the product or receipt.

Amount of computer purchase: $_____

☐ **Caregiving expenses** (maximum $1,812/month per dependent): Student allowance can be increased for a portion of caregiving expenses (i.e., daycare, elderly care, etc.) incurred during enrollment. Include a copy of the care provider contract or letter.

Name of dependent	Age	Monthly caregiving expenses
_____	_____	_____
_____	_____	_____
_____	_____	_____

☐ **Disability-related expenses:** Your cost of attendance can include an allowance for expenses related to your disability. This may include — but is not limited to — special services, personal assistance, transportation, equipment and supplies. Disability-related expenses paid by another agency may not be included. You must submit documentation that you are registered and approved by CU Boulder Disability Services.

Amount of disability-related expenses: $_____

☐ **Medical expenses:** Students may request a budget increase to include their documented medical expenses not covered by health insurance that occurred while they were enrolled at CU Boulder.

Amount of medical expenses: $_____

☐ **Other expenses:** In some cases, student budgets can also be increased if there are other unusual education-related expenses the student will incur during periods of attendance. You must attach supporting documentation including receipts. If your circumstance is related to loss of income, you'll need to complete the income calculator through Buff Portal for our office to get an understanding of your situation. Read step-by-step instructions on the Special Circumstances page.

Required: Please attach a letter explaining the circumstances behind your request. Include student's name and SID on each page, document, receipt, etc. that is submitted.

By signing this form, I certify that all the information provided is complete and accurate.

_____ _____
Student signature Date
Electronic and typed signatures are not acceptable.

Please submit your form by mail or online at www.colorado.edu/financialaid/forms/secure-document-upload 77 UCB • Boulder, Colorado 80309-0077 • www.colorado.edu/financialaid