



DePaul University
Office of Financial Aid at DePaul Central
2019-20 Study Abroad Cost of Attendance Appeal Form/Request for
Additional Loan: Graduate and Professional Students

DePaul Central Locations:

<u>DePaul Center</u> , Suite 9100 1 East Jackson Boulevard Chicago, Illinois 60604 <i>(If you mail this form, please use this address)</i>	<u>Schmitt Academic Center</u> , Suite 101 2320 North Kenmore Avenue Chicago, Illinois 60614
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Telephone (312) 362-8610 Fax (312) 362-5748

This form may be faxed, or mailed, or submitted by using our secure document upload website at
wdat.is.depaul.edu/FAUupload/default.aspx

Last Name	First Name	DePaul ID

Section 1: Program Information

1) Please indicate your academic career level: Graduate Professional

2) In what Study Abroad program are you participating? _____

3) For what term are you participating?

Graduate: Autumn: _____ // Winter: _____ // Spring: _____ // Summer: _____

Professional: Autumn: _____ // Spring: _____ // Summer: _____

Section 2: Additional Expense Appeal

The Office of Financial Aid will automatically receive information about your tuition costs and program fee directly from the Study Abroad Office, and will adjust your cost of attendance to reflect tuition and program fee expenses. You do not need to provide those expenses. Please use the section below to outline any additional study abroad expenses you may have.

Study Abroad Additional Expense	Required documentation	Amount
Tuition and Program Fee:	<i>We will receive these costs directly from the Study Abroad Office.</i>	
Airfare Expense:	Photocopy of actual ticket expense/confirmation of airline expense, or copy of airline receipt	\$ _____
Study Abroad Health Insurance Fee:	Documentation of required health insurance	\$ _____
Vaccinations:	Documentation of vaccination cost	\$ _____
Other:	Please attach a letter of explanation, and include all relevant documentation.	

Section 3: Loan Increase Request

If your study abroad costs result in potential additional loan eligibility, please sign below to authorize the Office of Financial Aid to add this loan offer to your financial aid award. You will need to accept this loan in Campus Connect when you have been notified to do so.

I authorize the Office of Financial Aid to offer additional student loan to cover my cost of attendance increase related to my study abroad program. I understand that I must accept this loan when I am notified. If my increased loan eligibility includes a Federal Direct Graduate PLUS offer, I understand that the Federal Direct Loan program will conduct a credit check as part of the approval of this loan. If I receive additional scholarship funding, my loan eligibility may decrease.

Student Signature: _____ Date: _____