2020-2021 Cost of Attendance Add-On for Rent and Utilities
RETURN This Form with the Requested Documentation to:
UC San Diego Financial Aid and Scholarships Office, MC 0013,
9500 Gilman Drive, La Jolla, CA  92093-0013, by fax to (858) 534-5459

PRINT Student’s Last Name First Name Middle Initial UC San Diego PID Number

☐ Undergraduate  ☐ Graduate - Department: _________________________

Rent and Utility Add-Ons are for students paying more than the standard estimated cost of attendance. Generally, this form is for students living Off Campus. There are also instances where On-Campus students pay more than the standard cost of attendance, for example students who live in family housing. Commuter students who live at home with a parent are usually not eligible to add on rent/utility expenses, but if there is a documented need, you will be contacted by a Financial Aid Counselor.

A. Rent:
Document your portion of the rent for one month:

1. Submit proof of payment, a copy of a cashed check or receipt bearing your name.
2. Have your landlord sign the statement on page two of this form OR attach a copy of your current rental/lease agreement which has your name listed as a tenant and is signed by your landlord.
3. Do you have children that live with you? ☐ Yes ☐ No

Roommates:
Do you share your residence with other people? ☐ Yes ☐ No
If yes, print their name(s) below:

1) ____________________________ 3) ____________________________
2) ____________________________ 4) ____________________________

B. Utilities:
Document your portion of utilities (gas, electricity, water, trash) for one month by attaching a bill and indicating the portion of the expense that you pay.

C. Telephone:
Document your telephone expenses for one month by attaching a bill and indicating the portion of the expense that you pay.

I am requesting a Cost of Attendance Add-On for $__________ to cover additional rent/utilities expenses above my UC San Diego standard cost of attendance.

I understand the following:
1. The information and documentation provided by me is complete and true to the best of my knowledge.
2. That rent and/or utility expenses I do not document will not be included and;
3. If I provide a printed itemized estimate for expenses, an unpaid billing statement, or other unpaid estimate for the rent and utilities expenses, I may be selected in an audit; and mayl be asked to submit proof of my payment for these expenses by submitting a copy of the purchase receipt, cancelled check, or billing statement/invoice.

SAVE COPIES OF YOUR RECEIPTS

I authorize the release of related information from my landlord and roommates to the UC San Diego Financial Aid and Scholarships Office.

Cost of Attendance Add-On requests must be submitted no later than May 15, 2021 of the current academic year to receive Direct Subsidized/Unsubsidized/PLUS Loans. Submission of a request does not guarantee an approval.

___________________________________      ____________________
Student Signature                      Date
2020-2021 Cost of Attendance Add-On for Rent and Utilities (cont’d)

A _______________________
UC San Diego PID Number

You may have your landlord sign the statement below OR attach a copy of your current rental/lease agreement which has your name listed as a tenant and is signed by your landlord.

TO: 
UC San Diego – Financial Aid and Scholarships Office, MC 0013
9500 Gilman Drive
La Jolla, CA 92093-0013

FROM: 
PRINT Landlord’s First and Last Name

Address

City, State, Zip

RE: 
PRINT Student’s First and Last Name

This letter confirms that the above-named student has a rental contract with me for the period:

______/______ to _______/______
(Month)   (Year)       (Month)   (Year)

The contract includes the following paid utilities:

□ Water        □ Trash or Sewer       □ Electricity      □ Gas        □ Other ________________

The above-named student’s share of the monthly rental cost is $ ____________.

The rental address for this student is: ____________________________________    _________
Address                              Apt. #
City/State/Zip Code

Does this student share this residence? □ Yes  □ No

If yes, please list the name(s) of each roommate below:

1) ___________________________ 3) ___________________________

2) ___________________________ 4) ___________________________

I certify that this information is complete and true to the best of my knowledge.

Landlord’s Signature ______________________ Date ___________________ Telephone Number ______________________

FASOFFICE USE ONLY:
Total approved for add-on: $ ______________  FAO Counselor: __________________ Date: __________

□ Student-Parent  □ Former Foster Youth
COA Code on EU: BA   (Cost of Attendance Add-On)
Loan Period: ( ) Fall ( ) Winter ( ) Spring ( ) Summer   Enter Memo data BUDxxxx, EFCxxxx, FAxxxx

NOTE: Deduct rent and utilities allowance in cost of attendance. Refer to Cost of Attendance Instructions