A

PRINT Student’s Last Name       First Name     Middle Initial     UCSD PID Number

☐ Undergraduate     ☐ Graduate - Department: ____________________________

Rent and Utility Add-Ons are for students paying more than the standard student budget. Generally, this form is for students living Off Campus. There are also instances where On-Campus students pay more than the standard budget, for example students who live in family housing because budgets are based on single student expenses. 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, a supervisor will review.

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 utilities 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 will 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 Wednesday, May 15, 2019 of the current academic year to receive Direct Subsidized/Unsubsidized/PLUS Loans. Submission of a request does not guarantee an approval.

__________________________________  ____________________
Student Signature                 Date
UCSD 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

FAO OFFICE 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 TU2 data BUDxxxx, EFCxxxx, FAxxxx

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