## UNIVERSITY OF ILLINOIS AT CHICAGO - Office of Student Financial Aid

College of Medicine: 808 S. Wood Street, M/C 782 -- Chicago, Illinois 60612-7301 -- Phone: (312) 413-0127

## 2023-2024 Request for Budget Adjustment- Rent/Mortgage

## **Section A – Student Information (Please print clearly)**

Last Name	First Name	M.I.		Email
Street Address	City	/	State	Zip Code
your current situation of the documentation loans. Therefore, if	n, you may be eligible to hav n submitted, you will be notif your request is approved and e loans may be affected. In a	e your COA re-evaluied accordingly. Ann I you have reached	uated. If your finar lual and aggregate your loan limits, or	Notification do not accurately reflect ncial aid eligibility changes upon review e loan limits restrict eligibility for federal nly your eligibility for Federal Graduate ivided equally between Fall and Spring
The COM OSFA allocampus, \$1,500/ mc	ocates housing expenses in to	and \$1,100/ month the eal for an increase t	for Peoria or Rock o accommodate tl	r: \$1,400/ month for Chicago off- ford. Students whose rent/mortgage ne additional cost of up to \$100 per s a roommate(s).
Documentation red	<b>juired:</b> A current lease or mo	rtgage statement.		
lessee. (If a pare		ut does not reside on	the property, also su	and signatures of the lessor and abmit a notarized letter from a parent stating severifying payment).
o Mortgag	je statement must include ad	dress, owner's name	e, and monthly am	nount due.
	mentation is not submitted academic year (August 2023			lease/mortgage statement must be vali – July 2024 for Summer).
	all Term: November 3, 2023	for 2023-2024 Budg Spring Term: Apr ved after the deadlin	il 5, 2024 Sumn	ner Term: July 5, 2024
I certify that the info		and any attachmen	ts is true and corr	ect. Signature must be wet or
electronic.				
Student Signature:			Date: _	
ENTER YOUR 9	-DIGIT UIN 🗪			
2324	BDAJ-E	В	ПТ	