



A Graduate School of Education, Health & Psychology

2026-2027 Cost of Attendance Budget Adjustment Guidelines

What is a Budget Adjustment?

A budget adjustment for Federal Student Aid (FSA) is a process that allows a student's estimated Cost of Attendance (COA) to be reviewed and potentially increased. This can lead to greater eligibility for federal student loans. Common reasons for a budget adjustment include necessary expenses such as purchasing a computer or laptop for coursework, medical costs, or dependent care. The primary goal of a budget adjustment is to ensure a student's financial aid package more accurately reflects their actual educational expenses, especially those not covered in the standard COA. It's important to note that a budget adjustment is not guaranteed. If approved, it may increase the amount a student is eligible to borrow through Federal Direct Loans or private loans.

Who Is Eligible for a Budget Adjustment?

The estimated COA is published on our website and can be viewed through your student portal. If you believe your actual expenses exceed the standard estimates, you may request a budget adjustment by completing this form and attaching the supporting documentation by the applicable deadline. Please be sure to submit a complete packet to prevent any delays with our review process. Our Financial Aid team is also available to support you with budgeting strategies and guidance throughout this process.

Before You Begin: Important Information About Budget Adjustments

Eligible Expenses

Budget adjustments may be considered for the following expenses:

- Housing costs (e.g., rent) that exceed the amount budgeted in your COA
- Dependent care expenses
- One-time computer or laptop purchase for academic use
- Non-elective medical, dental, or vision expenses not covered by insurance
- Disability-related expenses, such as special services, personal assistance, transportation, equipment, and supplies that are reasonably incurred and not provided by other agencies
- Transportation costs related to your education

Ineligible Expenses

Budget adjustments will not be considered for:

- Credit card payments
- Car payments
- Loan repayment
- Elective medical, dental, or vision procedures
- Job interview-related expenses
- Expenses incurred outside of your enrollment period

Submission Requirements

- All budget adjustment requests must include supporting documentation and be submitted by the deadline listed on the requested form.
- The Office of Financial Aid reviews each request individually and may take up to three weeks to process. You will receive a notification via email once a decision has been made.
- Additional documentation may be requested if needed to support your request.

Important Notes

- Approved budget adjustments typically result in an increase to your Federal Direct Loan eligibility. If approved, loan funds are disbursed evenly across semesters (e.g., Fall/Spring or Fall/Spring/Summer, depending on your program).
- Only expenses incurred during the current academic year are eligible for consideration.



Teachers College

COLUMBIA UNIVERSITY

A Graduate School of Education, Health & Psychology

2026-2027 Cost of Attendance Budget Adjustment Form

Student Name: _____ TCID: _____ Phone: _____

Instructions: Please check any item(s) you are requesting reconsideration of below. Before submitting your completed form, please gather all supporting/required documentation as indicated by each component, and submit all material to our office via email. Please do not include original copies of your supporting/required documentation.

Special Circumstance	Your Cost	Required Documentation
☐ Computer/Laptop Purchase: one-time purchase throughout the academic year, and cost cannot exceed \$2,000		- Proof of purchase (e.g., receipt with date of purchase)
☐ Housing Costs: monthly rent expense exceeds \$2,960 per month		- Copy of signed lease/rental agreement
☐ Transportation: monthly expense exceeds \$221 per month		- Proof of payment (e.g., bank statement or receipts)
☐ Child/Dependent Care: day care or child care expenses incurred during periods that include class time, field work, and internships for students. <i>Tuition payments for elementary or secondary schools do not qualify as dependent care.</i>		- Copy of 2024 tax returns with dependents listed, or birth certificate of child(ren) - Copies of all class, fieldwork, and/or internship schedules - Proof of payment and documentation from child care provider detailing number of hours per week with their cost/rate of charged services
☐ Medical Expenses: expenses related to non-elective medical, dental, or vision procedures that are not covered or reimbursed by health insurance OR Disability-Related Expenses: expenses related to a student's disability, such as special services, personal assistance, transportation, equipment, and supplies not provided by other agencies Note: overall expense cannot exceed \$4,000		- Provide proof of payment of service provided and documentation of service dates - Provide letter from your health care provider detailing course of treatment
☐ Other: expenses not covered in the estimated COA or exceeding the calculated estimate		- Signed statement outlining cost and supporting documentation including receipts

Submission Deadline: Requests must be submitted no later than 30 days before the last day of the semester.

Affirmation Statement:

I understand that submitting a Budget Adjustment Request does not guarantee approval. I certify that the information provided in this request is true and accurate to the best of my knowledge. I also understand that I am responsible for providing any additional documentation or information requested by the Office of Financial Aid.

If my request is approved, I understand that my Cost of Attendance may be increased, which could make me eligible to borrow additional federal or private student loan funds. Approval of a budget adjustment does not automatically increase my financial aid. I understand that I am responsible for requesting any additional loan funding for which I may be eligible.

Student Signature: _____ **Date:** _____