

2025-2026 Cost of Attendance Adjustment Form

General Information for Submission:

The Higher Education Act allows Financial Aid Administrators to address special circumstances utilizing Professional Judgment. Often, this process allows UH College of Medicine Office of Scholarships and Financial Aid to offer the ability to obtain additional student financial aid by adjusting a student’s Cost of Attendance as reimbursement for costs incurred. College of Medicine students may submit this form with supporting documentation to request a COA Budget Adjustment related to special circumstances, defined as and limited to:

- Check appropriate box(es):
- Computer Purchase:** \$2,500.00 reimbursement limit during enrollment at UH CoM Max
 - Childcare Costs:** \$225/week for 0-3yrs, \$169/week for 4+yrs
 - Health Insurance:** Prorated cost of premiums for dependents for enrollment dates at UH College of Medicine (student health insurance cost already included in cost of attendance)

You will receive notification of processing from the Office of Scholarships & Financial Aid within 2-3 business days.

A. Student Information

Student Name	UH Email	myUH ID
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B. Supporting Documentation

- **Computer Purchase** during the 2025-2026 Academic Year (Include purchase receipt listing type of payment and date). **Total Cost:** _____
- **Childcare Costs** during the 2025-2026 Academic Year (Include invoice from provider or payment receipt with dates. A signed statement from daycare with schedule of future payments is also acceptable). **Total Cost:** _____

Name(s) and ages(s) of Dependent(s): _____

- **Health Insurance** during the 2025-2026 Academic Year (Include premium rates for qualifying dependents). **Total Cost:** _____

Name(s) and ages(s) of Dependent(s): _____

C. Affirmation Statement & Signature

My signature below indicates that the information on this form and supporting documentation submitted are true and accurate to the best of my knowledge. I authorize the UH College of Medicine Office of Scholarships & Financial Aid to verify this information. I understand that providing false information can result in the cancellation or repayment of financial aid.

Student

Date

State law requires that you be informed of the following: (1) with few exceptions, you are entitled on request to be informed about the information the University collects about you by use of this form; (2) under sections 552.021 and 552.023 of the Government Code, you are entitled to receive and review the information; and (3) under section 559.004 of the Government Code, you are entitled to have the University correct information about you that is incorrect.



Tilman J. Fertitta Family
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