



Rec'd by: _____
Date: _____

FAO Action: _____
By: _____
Date: _____

The University of Mississippi

Professional Judgment Review Committee
Office of Financial Aid
257 Martindale Center
P.O. Box 1848
University, MS 38677-1848

Phone: 1-800-891-4596
Fax: (662) 915-1164

Extraordinary Travel Adjustment Form 2019-20

This form is used to request an increase to your Cost of Attendance (COA) for extraordinary travel and/or commuting expenses above the standard travel allotment in the student budget. Please access the following link for more information about Cost of Attendance: <http://finaid.olemiss.edu/cost-of-attendance/>.

To be completed by student (please print):

_____	_____	_____
STUDENT LAST NAME	STUDENT FIRST NAME	STUDENT MIDDLE NAME
_____	_____	_____ @go.olemiss.edu
OLE MISS STUDENT NUMBER	LOCAL TELEPHONE NUMBER	OLE MISS EMAIL ADDRESS

_____ Undergraduate/Pharmacy (EE-1/PY1) _____ Graduate/Law/Pharmacy (PY2-PY4)

You may be eligible for a budgetary increase for extraordinary travel expenses if you meet **one** of the following criteria. Based on the category selected below, additional information/documentation may be required. Please check one:

COMMUTER STUDENTS: You live full-time in a town or city **other** than Oxford, MS (or the location of your satellite campus), AND **you commute to the campus** at least one day per week for classes. (**Please note:** Budgetary increases for commuter students can be considered for the **current semester or term only**—fall, spring, or summer—you must submit **separate requests** for any subsequent term).

OR

NON-RESIDENT STUDENTS: You are a **non-resident student with a permanent address on record with the University of Mississippi that is greater than three hundred fourteen (314) miles from Oxford, MS**, or the location of your satellite campus. (**Please note:** Budgetary increases for non-resident students can be considered for **multiple terms**.)

If approved, you will be awarded Federal Direct Loans up to your maximum Federal Direct Loan eligibility. If you are at your Federal Direct Loan max and want to use a Direct PLUS Loan (parent loan) or a private/alternative loan, you must indicate so by checking here.

If your scholarships have been reduced, you must indicate so by checking here.

I am requesting an increase in my cost of attendance (COA) budget in the amount of \$ _____ (maximum of \$1500 per term) to cover additional travel expenses above those included in the standard COA for the following terms (indicate the term for which you are requesting the increase in your COA—**commuter students, select only one**):

_____ Fall 2019 _____ Spring 2020 _____ Summer 2020 (*Summer is considered separate from Fall and/or Spring.*)

I certify that the information and documentation provided are complete and true to the best of my knowledge. I also understand that undocumented expenses will not be included.

Student Signature: _____

Date: _____