

Financial Assistance Office

202 Picken Hall (785) 628 600 Park Street (800) 628 Hays, KS 67601 (785) 628

(785) 628-4408 (800) 628-FHSU Budget Adjustment (785) 628-4014 (fax) Request

www.fhsu.edu/finaid

Student Information				
Last Name	First Name	M.I.	FHSU ID	
Address (include apartm	nent number)	City	State	Zip Code
there may be times the F Professional judgment is possible circumstances a Through the use of profe application which could Module Certificate, and will be notified of the re FHSU before any adjust *Processing will be susp **Request must inc Please create an account Childcare. Indicate name a	clude the Budget SALT certifunt and then click on "Course	udent Aid (FAFSA) does not's financial assistance based and to be all-inclusive so aid administrator may be all student's eligibility. Once reviewed (within 45 days ontee an adjustment to your astments made based on this I the two weeks following litted prior to April 15, 20 ficate. This certificate can es" and select "Go to SAI the certificate of completing for childcare necessary aid per week.	ot reflect a family's current fed on unusual or special circulations of the domake adjustments to the the Budget Adjustment Requot the date the final document aid. You must have a complete request apply to aid eligibilities beginning of each semested to the completed by visiting value to the completed by visiting value. Courses". Complete the on.**	University recognizes inancial situation. Imstances. Examples of a that is not categorized. It is student's financial aid lest, SALT Budget station is submitted), you eted FAFSA on file at ity at FHSU only. It is er.* ents. www.saltmoney.org.
• Indicate where	ation. A student has an unusuathe student travels and how mamber of miles traveled (round t	any days per week.	muting expenses related to th	eir education.
Attendance) for compute 30, 2019). Although the computer (or electronic Documentation Attach copie	(or Electronic Equivalent) pure (or electronic equivalent) pure budget may be adjusted, this decequivalent) adjustment allow required (check one): es of paid receipts (if requesting es of purchase agreement (if receipts)	rchase up to \$1500 (purchases not guarantee that you wed within a four year p	ases must be made between Ju will have eligibility for addit eriod. e has been made).	uly 1, 2018, and June
I agree to provide proof approval of a similar fut understand that the inf this appeal. Further, the	standing: The information I su of all appeal information as incure request and that any financi formation provided in past ap he accuracy of the information erstand that if I purposely give	dicated above. I understantial assistance offered is line ppeals may be reviewed from I submit in this appeal	d that approval of this reques nited by the availability of fur or accuracy and this can im can affect the outcome of a	t does not assure nds in any given year. I pact the outcome of ny future appeals I
Signature of Student			Date:	