UNIVERSITY OF MINNESOTA

CHILDCARE EXPENSE APPEAL

DIRECTIONS

Academic Year 2021–2022

You must submit your appeal no later than the term deadline given here:
Fall term 2021—November 12, 2021
Spring term 2022—April 15, 2022
May/summer term 2022—July 22, 2022

Your childcare expenses during the 2021–2022 academic year may be considered in determining financial aid eligibility. The maximum allowance is $3,300 per semester for each dependent for the nine-month academic year. The Office of Student Finance (OSF) will only consider costs incurred while attending the University of Minnesota, Twin Cities, **during the *current* academic year.**

RETURN FORM:
ONLINE VIA: https://z.umn.edu/SpecialCircumstancesAppeal

BY MAIL TO:
Office of Student Finance
200 Fraser Hall
106 Pleasant St. SE
Minneapolis, MN 55455

IN PERSON ON CAMPUS TO:
333 Robert H. Bruininks Hall

Questions?
Phone: 612-624-1111
TTY (hearing impaired): 612-626-0701
Email: onestop@umn.edu

You MUST provide the following required documentation:

1. A written explanation of your situation, including whether the cost is paid in part by another person or agency
2. A statement, contract, or letter from a childcare provider that includes:
   - the name, address, phone number, and signature of care provider
   - the name(s) of dependent(s) in the provider's care
   - the expected period of care for each dependent, including start and end dates **during the 2021-2022 academic year**
   - the number of hours AND the cost per week for each individual in dependent care
3. Canceled checks or receipts as proof of payment for dependent care

If approved, loans are the only aid that may be increased, provided you have remaining annual loan eligibility.

To ensure privacy online, open in Adobe Reader (free at Adobe.com). Please add the required signature(s) in blue or black ink.

PART A. Student information

Name (last, first, middle initial)	University ID	Social Security number (last 4 digits)

Current mailing address (street, apartment or PO Box number, city, state, ZIP code, country)	Phone number (include area code)

List the name and Social Security number of any other household member attending the University of Minnesota, Twin Cities. Dependent care expenses can only be added to one family member's record. Attach an additional sheet of paper, if necessary.

Student name	Social Security number (last 4 digits)

PART B. Dependent care information

Do you pay for childcare expenses? ❒ yes ❒ no

If yes, list the name(s) of the dependent(s) who will be in the care of a paid provider. Attach an additional sheet if necessary

Name of dependent	Age	Relationship	Name(s) of care providers	2021-2022 childcare expenses

PART C. Certification

You must sign this form to certify that the information you provided is true. Misrepresentation of facts in connection with this form may be sufficient cause, in and of itself, for cancellation or repayment of financial aid whenever discovered.

Student signature	Date

Spouse/parent signature	Date

To request copies of this form in an alternative format, please call a Disability Resource Center liaison at 612-626-1333. The University of Minnesota is an equal opportunity employer and educator. This form is printed on paper made from no less than 20 percent post-consumer waste.

Please recycle.