



STUDENT FINANCIAL SERVICES Request to Borrow for Indirect Costs 2017-2018

Please check off the items and the corresponding amounts that you wish to have added to your loan to cover indirect costs. This worksheet is intended to be used as a budgeting tool to help guide you in determining a reasonable and limited additional amount of student and / or parent loan funds needed to support other living expenses while attending LIM College.

Indirect Costs	<u>Commuter</u>	<u>On-Campus</u>	<u>Off-Campus</u>
<input type="checkbox"/> Transportation (Maximum for commuter is \$1,000 per semester, for on and off campus students it's \$600 per semester)	<input type="checkbox"/> \$1,000/Semester OR Other Amount \$ _____	<input type="checkbox"/> \$600/Semester OR Other Amount \$ _____	<input type="checkbox"/> \$600/ Semester OR Other Amount \$ _____
<input type="checkbox"/> Meals (Maximum allowed per semester \$2,000, totaling \$4,000 for the year)	N/A	<input type="checkbox"/> \$2,000/Semester OR Other Amount \$ _____	<input type="checkbox"/> \$2,000/Semester OR Other Amount \$ _____
<input type="checkbox"/> Books & Supplies (Maximum allowed per semester \$450, totaling \$900 for the year)	<input type="checkbox"/> \$450/Semester OR Other Amount \$ _____	<input type="checkbox"/> \$450/Semester OR Other Amount \$ _____	<input type="checkbox"/> \$450/Semester OR Other Amount \$ _____
<input type="checkbox"/> Personal Expenses (Maximum allowed per semester \$750, totaling \$1500 for the year)	<input type="checkbox"/> \$1600/Semester OR Other Amount \$ _____	<input type="checkbox"/> \$750/Semester Or Other Amount \$ _____	<input type="checkbox"/> \$750/Semester OR Other Amount \$ _____
<input type="checkbox"/> Health Insurance If covered under a comparable plan proceed to www.gallagherkoster.com/LIM to complete the online waiver from 6/24/17 - 9/30/17.	<input type="checkbox"/> \$1850 Annually (estimated subject to change)	<input type="checkbox"/> \$1850 Annually (estimated subject to change)	<input type="checkbox"/> \$1850 Annually (estimated subject to change)
<input type="checkbox"/> Housing (Off campus)* (Maximum allowed per month \$1,300) *Copy of lease agreement is required for off-campus housing. Allowable up to 9 months Only)	N/A	<input type="checkbox"/> \$8,175/Semester	<input type="checkbox"/> \$ _____ / per month
<input type="checkbox"/> Loan Fees Estimated subject to change	<input type="checkbox"/> 4.276 % of Loan Amount Requested	<input type="checkbox"/> 4.276 % of Loan Amount Requested	<input type="checkbox"/> 4.276 % of Loan Amount Requested

* Please note, if you are borrowing for rent, it is recommended for off-campus students to limit borrowing to \$600 - \$1,000/month for rent.

Student (Print): _____

Student Signature: _____ **Date:** _____

Parent (Print): _____

Parent Signature: _____ **Date:** _____

Financial Aid Office Use Only:

New COA: _____

New Total PLUS or Alt Loan Amt:

Form Tracked Date: _____

F.A. Counselor's

Signature: _____

Date: _____