

2025-2026 Law School Financial Aid Revision Request and Cost of Attendance Appeal Form

C4d	nt Names			ID.			
Studei	nt Name:			ID:			
	e requesting to make changes to e requesting an allowable increas						
<u>Section</u>	A: Request to revise loans a	and work-study awar	<u>ds</u>				
	REVISIONS: Maximum Direct U exceed your cost of attendance (C			mic year. Maxi	mum Direct Graduat	te Plus loan or private loa	an
☐ Pleas	se increase/decrease my Direct U	nsubsidized Ioan	from	\$	to \$		
☐ Pleas	se increase/decrease my Direct G	raduate PLUS Ioan	from	\$	to \$		
WORK S	STUDY REVISIONS: Maximun	n Federal work study for I	Fall/Spring is	\$4,000. First y	ear JD students are r	not eligible for work stud	y.
☐ Pleas	se increase/decrease my federal v	vork study award	from	s	te	o \$	
	B: Cost of Attendance (COA c year and to the four categories	-	ments to the (COA are limite	d to expenses incur	red by the student in the	current
	OLOGY EXPENSES: up to \$2,5 must be provided, and purchase			a computer, pi	rinter, and LLS requir	red software.	
O Plea	ase increase my loan by the indic	ated amount to cover ted	chnology exp	enses \$			
of a signomember Member Legal de 1. They li their sup	,991 for expenses during the aca ed enrollment contract with a ce rs in an uncertified arrangement ependents include children or otl ive with the student 2. They curre oport from the student between a aship and documentation must b	rtified dependent care pr nt cannot be considered ner people (except a spou ently receive more than h luly 1, 2025, and June 30,	rovider and co I. use) who mee alf of their su	ppies of payment all the follow pport from the	ent receipts. Depend ving criteria: e student. 3. They w	dent care provided by f	family ore than half o
C Tot	al expenses you will pay during t	he 2025-2026 academic y	year \$				
Award m	NG CHANGES: up to \$11,557 p nay be pro-rated if housing chang ase increase my loan by the indic	ge occurs after August 1 ,	,2025.		financial aid award w	vas based on you living v	vith relatives.
			-		·		
	I/Dental Expenses: Expenses portion of your medical/dental e						
Total exp	penses you will pay during the 20	025-2026 academic year	\$				
ENROLI	LMENT CHANGES: Graduation	term update and unit er	nrollment cha	nges. If gradu	ating in the fall, indi	cate zero units for spring	1.
□ lam	adjusting my units, please increa	se my COA and loans for		units Fall 2	2025	units Spring 2026	
criminal c take 5-7 b	nat the information I have provided a charges. I agree to inform the LMU Fir business days. Loan and work revisior a result of your appeal.	nancial Aid Office of any char	nges in this info	ormation. I am a	ware that the appeal p	rocess to adjust my cost of	attendance can
Studen	t Signature				Datas		
		Ho	w to Submi	t this Form:	Date:		
Phone: Fax: Mail:	310.338.2753 310.338.2793 LMU Financial Aid Office 1 LMU Drive, Suite 270 Los Angeles, CA 90045	The Department of Edu personally identifiable secure means. This forr mail or fax this form to you may submit it as a available at financialai	information (Post cannot be sugardated) the address or PDF through o	II) must be trans bmitted via em fax number list ur Secure Uploa	smitted through ail. You may ed to the left, or	For Office Use Only: RRAAREQ - REVREQ at C Etrieve - Revision Reque FAO Staff Initial Date:	