

BUDGET WORKSHEET OFF-CAMPUS STUDIES • FINANCIAL AID • SCHOLARSHIP

STUDENT NAME _____ ID # _____ (located on your degree audit)

Your cell phone # _____ Your email address: _____ @carleton.edu

PROGRAM NAME: _____

Program Sponsor: _____
(for example: SIT, DIS, CIEE, Butler, ACM, etc.)

Program Dates: _____ TO _____ Term(s) / Year of program: Fall 20____ Winter 20____ Spring 20____

Will you be taking a leave of absence from Carleton during the academic year you will be studying off-campus? If so, please mark the term/year you'll be on leave:

Fall 20____ Winter 20____ Spring 20____

****For all non-Carleton programs you MUST:**

1. **Attach the supporting cost estimates from the program's website or catalog.**
2. **Include the webpage URL specifically for this information:**

PROGRAM COSTS

Program Fee (amount billed by program sponsor): \$ _____

List below program costs NOT covered by the program fee.

(NB: For All Carleton seminars - room, board, books, and supplies are included in your Cost of Attendance.)

<p>ROOM _____</p> <p>BOARD _____</p> <p>BOOKS, SUPPLIES _____</p> <p>HEALTH INSURANCE _____ <i>You must have health insurance to be enrolled at Carleton. Only include cost here if:</i> 1. <i>You do not have insurance that covers you at the program site and your program requires it</i> 2. <i>Your program requires you to buy additional insurance .</i></p> <p>TRAVEL TO/FROM PROGRAM SITE _____ <i>Include itinerary, if you have it, otherwise provide a tentative itinerary.</i></p>	<p>ADDITIONAL PROGRAM TRAVEL _____</p> <p>PASSPORT, PHOTO, ID _____</p> <p>VISA _____</p> <p>TRAVEL INSURANCE _____ <i>Only include if you are actually purchasing travel insurance. May cover airline cancellations, travel delay, lost, stolen, or broken valuables, etc. You must provide proof of purchase before expense will be considered.</i></p> <p>OTHER _____ <i>Please explain</i></p>
<p>TOTAL COSTS <u>NOT</u> COVERED BY THE PROGRAM FEE: _____</p>	

**** You must be enrolled full-time in order to receive financial aid.**

Please continue on other side →

Complete items 1, 2, and 3 below before submitting your petition.

1. Please list any other off-campus study programs you have participated in:

2. I have accepted all of my self-help (loans and student employment) and would like to be considered for a **Carleton OCS scholarship (Dubrow, Shivers, Sosted, 1956)**: YES NO (please circle)

NB: Carleton scholarship application deadlines:

Spring 2012 programs: February 6, 2012 Summer 2012 and Winter Break 2012 programs: April 30, 2012

Fall 2012 programs: April 30, 2012 Winter term 2013 programs: October 15, 2012

Spring 2013 programs: February 4, 2013

3. I have reviewed the costs associated with this off-campus program and understand that any additional expense beyond the cost of a term at Carleton is the responsibility of the student/family. I understand that if my program is less costly, that my financial aid will be reviewed and adjusted. I understand that any scholarships I receive for my program must be reported to the Office of Student Financial Services.

Signature _____ Date _____

LOAN REQUEST

***Complete the info below ONLY
if you would like to be considered for LOAN funding
to assist with your OCS expenses.***

Submit this completed form (both sides) to the Office of Student Financial Services, Henry House as soon as possible but no later than 30 days prior to departure. Please attach any additional information that would be useful in considering your request for additional loan funds.

I have reviewed the costs associated with this off-campus program and understand that any additional expense beyond the cost of a term at Carleton is the responsibility of the student/family. However, to assist with these additional expenses, I am requesting a loan for

\$ _____

_____ I have reviewed these costs with my parent(s). They are aware of this request.

_____ No, I have not talked with my parent(s) about this.

Carleton strongly recommends discussing this request with your parent(s)