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2024-2025 Financial Aid Student Budget Adjustment Request			
Last	First	M.I.	M00#:
	le to receive Federal Financial Aid may be eligible to have their y ange in circumstance. Please check only <b>(1)</b> box <b>(option)</b> below	early budget adjusted provid	ed that they are experiencing a
There was ar	n unexpected medical emergency		
I experienced	d additional expenses		
Other			
information is clear and	ed statement of the circumstance(s) which requires a change in d concise. Avoid vague statements such as "I am experiencing a your requests. Request forms submitted without supporting do	financial hardship." You mu	st also submit any supporting
OFFICE USE ONLY I	BELOW THIS LINE		
Comments:			
ESA III or			
ES Dean:	Date:	Decision:	Approved Denied