

Child Care Expense Form 2011-2012

Student Financial Aid

A. STUDENT INFORMATION

Last Name	First Name	M.I.	BGSU ID Number
Address (include apt. no.)			Phone Number (include area code)
City	State	Zip Code	BGSU E-mail Address

Student Financial Aid (SFA) uses the chart below to determine an average child care allowance for the 9 month academic year. If your child care expenses exceed the amount listed in the chart, SFA will consider your actual child care costs if you submit this form with Section B completed and documentation from your child care provider as stated below. If no other documentation is provided, the amount on the chart below will be added to your budget for the academic year and your financial aid will be adjusted accordingly.

Chart of Average Child Care Cost per Academic Year			
Number of Children	One	Two	Each Additional Child
Pre-School to 5 years	4068	7316	3482
6-12 years	2233	4030	1909
13 and older	0	0	0

B. YOUR CHILD CARE EXPENSES

Complete this section to indicate to SFA your dependent child care expenses. If your expenses exceed those listed in Section A, complete Sections B and C, and attach documentation from your child care provider stating your weekly child care expenses.

Child's First and Last Name	Age	Dates Child Care Provided	Weekly Amount Paid
1.		to	\$
2.		to	\$
3.		to	\$
4.		to	\$

C. EXCESS CHILD CARE EXPENSES

Complete this section **ONLY** if your expenses exceed those listed in Section A. If you completed Section B your child care provider must complete Section C. If you complete Section B but Section C is not completed, no adjustment will be made by Student Financial Aid.

Child's First and Last Name	Age	Dates Child Care Provided	Weekly Amount Paid
1.		to	\$
2.		to	\$
3.		to	\$
4.		to	\$

Child Care Provider Signature (required only if Section C. is completed)

Date

Student Signature

Date