University of Northern Iowa

Office of Financial Aid & Scholarships

2023-2024 CHILDCARE EXPENSE BUDGET ADJUSTMENT

Student's Last Name | **Student's First Name** | **UNI ID Number**

If you will be paying for childcare during the 2023-2024 academic year (August 2023 – May 2024) and you are requesting a budget adjustment, please complete and sign this form. Please note, a budget increase will likely only allow additional funding in the form of a federal or private education loan. To explore options for childcare assistance, please visit dhs.iowa.gov/child-care.

1. **List the names and ages of your children receiving childcare during the 2023-2024 academic year (Aug. 2023 – May 2024).**

Child's Full Name	Child's Age	Cost of Childcare per Week
		$
		$
		$
		$
		$
	Total Cost of Childcare Per Week:	$

Name of Childcare Provider | Phone Number of Childcare Provider

Address of Childcare Provider | City | State | Zip Code

2. **Please complete one of the following:**

- Attach a receipt verifying at least one monthly payment to the childcare provider, **OR**
- Have your childcare provider sign and date this form below

By signing below, I hereby verify that the information above is accurate and true to the best of my knowledge.

Signature of Childcare Provider (*signature must be handwritten)* | **Date**

3. **The student must sign below.**

My signature below verifies that the information on this form is complete and correct.

Student Signature (*signature must be handwritten)* | **Date**