



2025-2026 Cost of Attendance Adjustment Request (Child Care Expenses) Fall 2025/Spring 2026

Student First Name: _____ Student Last Name: _____ ID: _____

DOB: ____/____/____ Primary Phone #: (____) _____ - _____ Secondary Phone #: (____) _____ - _____

Childcare Expense Information

Number of your children age 13 and under in childcare: _____

<i>Child's Name</i>	<i>Child's Age</i>	<i>Monthly Amount Paid for Childcare</i>	<i>Number of Months in Childcare for Fall 2025 & Spring 2026 ONLY</i>

NOTE: Changing a student's cost of attendance does not increase Pell Grant eligibility.

Please indicate the financial aid program that you intend to get increased/adjusted _____.

(Student's Signature)

(Date)

Submitting documents. *You may submit your documents in several ways:*

- Email to: finaid@utrgv.edu
- By mail to: **UTRGV U Central**, Visitors Center 1.113, 1201 W. University Drive, Edinburg, TX 78539
- Physical Drop off to locations listed below:

Brownsville U Central Location: The Tower, Main 1.100 One West University Blvd. Brownsville, Texas 78520 Ph: (888) 882-4026	Edinburg U Central Location: Student Services Bldg., First Floor 1201 West University Drive Edinburg, Texas 78539 Ph: (888) 882-4026
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For Office Use Only:

Processed by: _____

Date: _____