



2022-2023 Additional Medical Expense Request

ADMED

Name: _____ Evergreen ID: _____
Last, First, MI

Address: _____ Phone: _____
Street, City, State, ZIP

Use this expense request to add medical and dental expenses to your Cost of Attendance. Medical and dental expenses not covered by insurance are among the special circumstances explicitly mentioned in Section 479A of the Higher Education Act. If you incur medical expenses for conditions that prevent you from attending class or education-related activities during the academic year, you may request that your Cost of Attendance at Evergreen be increased accordingly.

Please provide the following with this request, or it will be considered incomplete:

- ☐ A letter explaining what the extra expense is for. Please include dollar amounts and time frames that supports your request. *We cannot consider expenses incurred before or after the current academic year.*
- ☐ Documentation for the expense (i.e. copies of receipts, canceled checks, estimates or invoices from your medical provider).
- ☐ Review, print and attach your total loan indebtedness at www.studentloans.gov

Expenses must be clearly medical or dental in nature, and they must be clearly documented. Expenses may include costs for medical, dental or vision care, physical therapy and psychotherapy. Allowable expenses may include after health insurance premiums, expenses not covered by insurance, including co-pays, deductibles and non-covered expenses, prescription medications, and expenses for durable medical equipment (e.g., eyeglasses, crutches, thermometers, blood pressure meters, glucometers). We cannot consider elective cosmetic surgery or elective cosmetic dentistry.



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In most cases, the result of this request will result in additional loan(s) depending on eligibility. Please note that when funding your additional expenses with a Federal Direct Unsubsidized Loan, interest begins to accrue as soon as the loan disburses.

Please check the appropriate box:

- ☐ Please add or increase my Federal Direct Subsidized Loan to my maximum eligibility.
- ☐ Please add or increase my Federal Direct Unsubsidized Loan to my maximum eligibility.
- ☐ If eligible, I only want to accept \$ _____ in loans.
- ☐ I have another source of money to cover this expense: _____. (eg. Scholarship, AmeriCorps, Private Loan, etc.)
- ☐ My parent is going to request a Parent Plus Loan.

Note: Loans may be cancelled on request during the academic year. Cancellation of loans may result in you owing the college for funds already disbursed. If you have not accepted any Federal Direct Loan for the current academic year, follow the directions at <http://www.evergreen.edu/financialaid/loans-direct>

Student's Signature: _____ **Date:** _____