

Financial Aid and Scholarships  
University of California, Davis  
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Davis, CA 95616-8596

FAX: (530) 752-1587  
financialaid.ucdavis.edu  
[my.ucdavis.edu/ask\\_us](http://my.ucdavis.edu/ask_us)

School of Education Credential Program  
Documenting Additional Transportation Expenses for 2017-2018

Student Name: \_\_\_\_\_ Student ID: \_\_\_\_\_

Email: \_\_\_\_\_ Phone #: \_\_\_\_\_

Current Address: \_\_\_\_\_  
(Street, City, State, Zip)

**INSTRUCTIONS**

1. Review your Financial Aid Student Expense Budget at [financialaid.ucdavis.edu/MyAwards](http://financialaid.ucdavis.edu/MyAwards) to determine whether you have exceeded the budgeted allotment for transportation during the academic year.
2. Attach a written statement indicating what your transportation costs are that exceed the standard amount allowed in the budget (see list of allowable expenses that follow).
3. Expenses must be incurred during the academic year, and copies of documentation and receipts must be submitted.
4. If your request is approved, you will be offered additional financial aid based on the funding available at the time of the request.

**ALLOWABLE TRANSPORTATION EXPENSES INCLUDE:**

The basic student budget covers a moderate cost of public transportation for incidental travel to and from your home, and an annual bicycle license. **Additional transportation costs must be educationally related.** Acceptable expenses may include:

- ♦ Transportation costs required by an academic program. Supporting statements from the School of Education may be requested.
- ♦ Costs of commuting to UC Davis from surrounding communities.
- ♦ Costs of commuting to teaching assignments from surrounding communities.
- ♦ Cost of car insurance for student that exceeds current budget allotment.
- Commute from home to school, or permanent residence, or teaching assignments (explain in your attached statement).

*Trips to teaching assignments:* \_\_\_\_\_ miles \_\_\_\_\_ times a month

Location 1: \_\_\_\_\_

Location 2: \_\_\_\_\_

**I certify that all of the information on this form is true and complete, and that I will report any changes to the Financial Aid and Scholarships Office.**

**Student's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_