

2011-12 BUDGET INCREASE - DEPENDENT CARE

August 22, 2011 - May 11, 2012

Student's name: _____ ID: _____ Phone: _____

No award adjustments will be made between August 12 - September 6, 2011; and January 7 - January 31, 2012

Deadlines for submission of this form: Nov. 1, 2011 for fall semester (if it is your last semester of enrollment) and April 1, 2012 for continuing students.

Attach documentation of charges, payments, and/or agency assistance.

Is dependent's co-parent a student? No Yes

If yes, where are they enrolled? Boise State Other (specify): _____

Co-parent's name _____ & SSN/ID _____

I certify the accuracy of the above information and authorize my dependent care provider to release the information requested.

Signature of student: _____

➤ To be completed by dependent care provider. Use a separate form for each provider.

Name of each dependent For whom you are Providing dependent care	Age of Dep	Monthly Dependent Charge	SOURCE OF PAYMENT		
			Amount paid by:		
			Student	ICCP	Other

I certify the above information is correct.

Signature of dependent care provider _____

Date _____

Name of dependent care facility: _____

Phone number of dependent care facility/provider: _____

If approved, what type of additional aid are you seeking? Please indicate your intent:

- Direct Loan increase Work/Study increase PLUS Loan Alternative Loan
 Scholarship reinstatement for previously reduced/ cancelled award (scholarship name _____)

The federal Direct Loan limits are: (Not all students qualify for these maximums)

Dependent students: freshman: \$5,500; sophomore, \$6,500; junior/senior, \$7,500

Independent students: freshman: \$9,500; sophomore, \$10,500; junior/senior, \$12,500; graduate student \$20,500.

The maximum work/study award is: \$4000

If you are interested in obtaining help from ICCP, please call them thru the Idaho Care-Line 208-332-7205 or 1-800-926-2588 (TDD).