

# CENTER FOR STUDENT OPPORTUNITY

Off-Campus Study  
Alma College  
(989) 463 7247  
offcampusstudies@alma.edu

## Cost Estimate Worksheet USA, Washington DC - The Washington Center

This form is used to help develop a financial plan. *The amounts listed are for estimating purposes only.* Actual amounts billed to your student account may vary due to personal selection and/or assignment and are subject to change without notice.

Below are estimated fees based on Fall 2017 prices. The Estimated 2019 fees will updated as they become available.

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

A/C Term /Year of study: Winter ~ 2019  
Program Dates: approximately 15 weeks

### Estimated Program Fees invoiced to Alma College and added to your Alma College Student Account:

\$ _____	8,178	Tuition of Program Provider
\$ _____	5,820	Housing in a professional living community within the Residential and Academic Facility (RAF) in NoMa. Students live in furnished two bedroom, two bath apartments for four people near Capitol Hill and Union Station with amenities such as basic cable, internet, and utilities. The program provides many household amenities; i.e. dishes, microwave, furniture, etc. Refer to the program's website for full details. Meals are not included.
\$ _____	490	Alma College Off-Campus Study Administrative Fee
\$ _____	<b>14,488</b>	<b>Estimated Fees</b>

Additional Estimated Expenses listed below are paid out-of-pocket to service providers, travel agents, etc. Fill in the blanks with any required/optional expenses and personal spending to help complete an estimate of your financial costs.

\$ _____	60	Application Fee			
		Miscellaneous living expenses estimated at \$175/week, 15 weeks. This figure will vary based on a student's personal preference and spending habits. Expenses considered are food, course materials, supplies, cultural events, entertainment, laundry, living expenses, public transportation, taxis, etc. This budget takes into consideration food is purchased and prepared at home.	\$ _____		Books and academic materials
			\$ _____		Cell Phone/Communication/Internet Usage
			\$ _____		Entertainment (museums and monument touring are free)
			\$ _____		Incidentals
			\$ _____		Laundry
			\$ _____		Personal Expenses
\$ _____	2,625	Transportation, round trip home to program:	\$ _____		Souvenirs
\$ _____	350	Train travel at \$250 or airfare at \$400	\$ _____	10	Transcript fee if program requires official Alma transcript(s)
			\$ _____		Other (list)
			\$ _____		Other (list)
\$ _____	<b>3,035</b>	<b>Estimated Additional Costs</b>	\$ _____		<b>Total of above to add to ESTIMATED TOTAL</b>
<b>\$ _____</b>	<b>17,523</b>	<b>ESTIMATED TOTAL</b>			

Students attending an off campus study program must take this form to the Financial Aid Office to be completed. While there, schedule an appointment with a representative to discuss your financial aid package. Once completed, the Coordinator of Financial Counseling in the Center for Student Opportunity can also provide financial advice.

**TO BE COMPLETED BY FINANCIAL AID OFFICE**

\$ \_\_\_\_\_ \*\* This is your financial aid award for the above mentioned term and it includes the following:

\$ _____	State/Federal Grants	\$ _____	Other:
\$ _____	Student Loans	\$ _____	Other:
\$ _____	PLUS Loans	\$ _____	Alma Funds

Potential eligible Venture Funds not included in Financial aid award total above \$ \_\_\_\_\_

Alma funds ineligible for Off-Campus Study and not included in Financial aid award total above \$ \_\_\_\_\_

*\*\*This award amount is a point-in-time estimate and subject to change based on Alma College receiving/processing your FAFSA information. Please note you will need to meet Federal and State FAFSA deadlines. Amounts may decrease due to changes in funding from Federal and State programs which is beyond the control of Alma College. Financial aid for Fall Term will be estimated over the summer, and can be viewed through the student portal.*

I have reviewed & discussed the financial requirements with the above mentioned student and provided an estimated financial aid package.

Financial Aid Office signature: \_\_\_\_\_ Date: \_\_\_\_\_

I understand that it is in my best interest to verify my financial aid package prior to participating in a Fall or Winter program.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

UPLOAD COMPLETED FORM TO YOUR OFF-CAMPUS STUDENT ACCOUNT