

CENTER FOR STUDENT OPPORTUNITY

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

Cost Estimate Worksheet Australia - University of Wollongong

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.

The estimated fees below are based on the program's published prices from Fall 2019. When the fees are added to a student's account, they will be adjusted to the program's updated prices.

Student Name: _____ Student ID: _____ A/C Term /Year of study: Fall ~ 2020
Approx. Program Dates: _____ Approximately 18 weeks
July - November

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

\$ _____	7,000	Tuition of Program Provider. Refer to website for full list of services included.
\$ _____	300	Additional Program Provider Fees for mandatory Overseas Health Coverage (health insurance)
\$ _____	110	Additional Program Provider Fees for mandatory Student Services and Amenities Fee (SSAF)
\$ _____	4,400 - 6,500	Room in a unit/dorm/house, depending on housing placement. Range of fees based on housing assignment; some housing options have 19 meals per week included, others are self-catered (no meals). Assignment is first come-first served based on request and availability. Refer to the program website's accommodation section for full details of the housing services and amenities.
\$ _____	380	Room and Board Ancillary Fees (Community Activity Fund, Services & Infrastructure, Student Room & Contents Insurance, etc.)
\$ _____	490	Alma College Off-Campus Study Administrative Fee
\$ _____	12,680 - 14,780	Estimated Fees

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.

\$ _____	45	Application Fee for housing	\$ _____	Cell Phone/Communication/Internet Usage
\$ _____	185 - 300	Books, Supplies, etc.	\$ _____	Cultural Events / Entertainment
\$ _____	1,200 - 2,000	Personal Expenses (entertainment, travel, etc.)	\$ _____	Gift / Souvenirs
\$ _____	1,500 - 2,000	Meals, if self-catered housing is assigned	\$ _____	Incidentals
\$ _____	200	Optional Recreation Pass to Univ. Health Club	\$ _____	Laundry
\$ _____	155	Passport & associated fees	\$ _____	10
\$ _____	1,700	Round Trip Airfare	\$ _____	Transcript fee if program requires official Alma transcript(s)
\$ _____	475	Visa & Associated Fees	\$ _____	Other (list)
\$ _____			\$ _____	Other (list)
\$ _____			\$ _____	Other (list)
\$ _____	5,460 - 6,875	Estimated Additional Costs	\$ _____	Total of above to add to ESTIMATED TOTAL

\$ 18,140 - 21,655 ESTIMATED TOTAL

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 that will apply for Off-Campus Study for the above mentioned term:

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

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 the program.

Student Signature: _____ Date: _____

UPLOAD COMPLETED FORM TO YOUR OFF-CAMPUS STUDENT ACCOUNT