



California Institute of Integral Studies

EXA ART SUPPLIES PURCHASE VERIFICATION FORM

Semester: Fall Spring Summer _____
Year

Student's Legal First Name

Student's Legal Last Name

Student ID

Please submit the following documents with your complete this form :

1. Store receipt(s) with date of purchase (date must be within the active academic year)
2. Proof of payment : Copy of bank/credit card statement(s)

By signing this form, you are agreeing to the following terms and conditions:

- I understand that, once I have exhausted my Stafford Loan eligibility, I must apply and be approved for an additional loan (i.e. Federal Graduate PLUS Loan).
- I understand that if I provide false information, the Financial Aid Office reserves the right to cancel this form and/or make any necessary adjustments to my account.
- I understand the maximum increase in Cost of Attendance for my art supplies is \$1,000 and this is for the duration of my Expressive Arts program at CIIS.

By submitting this form I certify the information provided is complete and true to the best of my knowledge.

Signature (must be hand-written)

Date

If you have any questions about the above terms and conditions, feel free to contact our office at:

Financial Aid Office
1453 Mission Street
San Francisco, CA 94103
Fax : 415-575-1268
Phone : 415-575-6148
финаid@ciis.edu