



4th YEAR RESIDENCY TRAVEL ALLOWANCE INCREASE REQUEST
All documentation due by **March 15, 2024**, via medfinan@gwu.edu

MD Program Office of Financial Aid
2300 I St. NW, Ross Hall Room 106,
Washington, DC 20052
medfinan@gwu.edu
tel. 202.994.2960
Fax. 202.994.9488

A \$2000 allowance for residency travel is based on the average costs incurred by GWU medical students for interviews and is already included in your cost of attendance (COA). However, students seeking to match in highly competitive areas, who are obtaining student loans to pay for their medical education, may find that this budget will not meet their needs.

For **fourth year students only**, the MD Program Office of Financial Aid will increase the residency travel budget allowance and process a loan increase on a case-by-case basis. A review of your application does not guarantee that your request will be granted, or granted at the level of funding originally requested. Please provide the best documentation possible. **Note: Credit card and bank statements are not an acceptable proof of payment, you must submit a receipt.**

Required:

1. **A statement** explaining why you believe an exception should be made to include more than the budgeted amount for residency travel in your COA.
2. **Proof of interview acceptance**, including: date, time and location of interview.
3. **Receipts or documentation of dollar amounts to be paid** (print out estimates from reputable online sources), to justify your full request. All documentation must be presented in your request to increase your COA. **If documentation is for an amount to be paid in the future, paid receipts must be submitted to the office by March 15, 2024.** Documentation may include the following items: ERAS application and Match application fees, airfare, taxi/shuttle bus and hotel expenses. Ineligible expenses are: clothing, meals (already covered under the budget), travel to meals (local transportation budget), companion travel expenses, and luggage expenses. If you choose to spend an extra day, or more, at the location, the associated expenses cannot be considered. Your request must include the following:
 - a. Your name (at the top of every page)
 - b. Your GWID (at the top of every page)
 - c. Total Amount requested (on this form below)
 - d. Copy of your Electronic Residency Application Service Applications
 - e. Residency program details, **presented in date order of interviews (Please use the Travel Expense Worksheet that you will email to medfinan@gwu.edu)**, include the following on your spreadsheet. It would be especially helpful to list your expenses by trip:
 - i. Name/location of the facility
 - ii. Date of departure
 - iii. Date of interview
 - iv. Date of return

See next page for further instruction

- v. **Documentation of future dollar amount expenses** to be replaced by actual receipts by March 15, 2024. This may include flight/hotel/taxi/shuttle bus estimates from reputable online sources.
- vi. **Actual Receipts with proof of payment** (due by March 15, 2024) must be **presented in chronological order** and marked with the following information:
 1. **Circle** the date, method of payment, and amount charged. These must be itemized. **Please ask for an itemized receipt.**
 2. Print your name and GWID
 3. Reason for expense (flight, hotel, taxi, shuttle bus, etc.)
 4. If you estimated expenses please *staple your receipts to a copy of the original documentation of estimated expense that you provided in your application.*
 5. If any estimates or receipts are voided (due to additional interviews being added or travel related issues, e.g. weather issues), please provide documentation and an explanation.

4. Provide your requested adjustment amount on the line below and attach all required documentation in chronological order of your interviews.

Please keep in mind that it is advisable to use whatever means possible to save money when interviewing, including staying with friends and family. Submitting this form will increase your debt, and will often be funded from the Federal Direct Unsubsidized Program (7.05% APR) or the Federal Direct Graduate PLUS Loan Program (8.05% APR). Both of these loans will begin to accrue interest immediately upon disbursement. Furthermore, the Federal Direct Graduate PLUS Loan is credit based. If you do not have a valid credit decision (dated within the last 180 days) for a Graduate PLUS Loan, your credit will be pulled again. This will result in a hard hit to your credit score.

Amount of budget increase request: \$ _____ (round down to the nearest dollar).
 Note: you must have receipts or estimates in excess of \$2000.

By signing below, I certify that these funds will be used for my residency application and interviewing expenses **only**. I also understand that although my request will be reviewed, such review may not result in approval at the amount I requested. Furthermore, I understand that my request including spreadsheet must be submitted by email to medfinan@gwu.edu. Additionally, all receipts are due on March 15, 2023 and that any overpayment must be refunded to GWU prior to graduation.

Student Signature: _____ Date: _____

Printed Name: _____ GWID: _____

Phone number: _____

Financial Aid Office Use Only

Approved in full ___ Limited Approval (attach documentation) _____ Denial ___ Date: _____ Signature: _____
