



Office of Financial Aid Services

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www.montana.edu/wwwfa

Study Abroad Budget
ESTIMATED COST

Student Name: _____ GID _____

Name of Program: _____

Type of Program: _____ [] MSU Tuition and Fees [] Program Fee

Program Dates: _____

Table with 2 columns: Expense Category and Amount. Rows include Tuition and/or Program Fee, Room and Board, Transportation, Application, Placement, Processing Fee, Passport, Visa, Other Documents, Miscellaneous Living Expenses, and Total.

Study Abroad Advisor Signature

Date

Student: This is an estimate of your study abroad cost. Please read and sign the appropriate statement below and bring to the Financial Aid Office for required signature. Turn completed form in to the MSU Study Abroad Office, 401 Culbertson Hall.

I do not receive any scholarships or financial aid.

Student Signature

Date

I receive scholarships and/ or financial aid. I have met with financial aid and understand how my scholarships/financial aid will or will not apply to my study abroad program.

Student Signature

Date

[] I receive financial aid and would like to be considered for additional aid for study abroad.

Financial Aid: Please submit this form to the Scholarships and Grant Coordinator for approval and forwarding if appropriate.

Financial Aid Officer Signature

Date

Return completed form to the MSU Study Abroad Office - 401 Culbertson Hall