

# Budget Plan Worksheet Instructions

1. Determine the total annual expenses using the tuition, room, board, and fees charges listed in the table below. Fees not listed in the expenses allowable for the BBP may not be included in this calculation. Enter the total expenses on line **(1)** of the Budget Plan worksheet.
2. Determine total annual credits by listing those financial aid awards **that have been approved by the Financial Aid Office for payment to the account.** Do not include College work study, campus employment, and stipend funds. Funding from outside sources may be included **only if** a letter of intent from the sponsor accompanies the application. Enter the total credits on line **(2)**.
3. Enter the difference between lines **(1)** and **(2)** on line **(3)**. This is your approximate Budget Plan contract amount.
4. Complete the rest of the worksheet to determine the monthly payment and the amount to enclose with your application.

## 2008-2009 Expenses Allowable for the BBP

	<b><u>Resident Students</u></b>	<b><u>Off-Campus Students</u></b>
Tuition <sup>a</sup>	\$37,574	\$37,574
Room <sup>b</sup>	5,458	0
Board <sup>c</sup>	5,408	0
Campus facilities fee	0	270
Health services fee <sup>d</sup>	660	660
Student activity fee	<u>140</u>	<u>140</u>
<b>(1) Total</b>	<b>\$49,240</b>	<b>\$38,644</b>

<sup>a</sup> \$37,574 is the tuition for a full-time course load of up to 20 credits. A fee of \$1,176 is charged for each credit over 20.

<sup>b</sup> **Reserved housing cannot be cancelled without prior approval from the College. Students who have reserved campus housing and move off campus are still responsible for the full housing charge.**

<sup>c</sup> All resident students are required to take the meal plan.

<sup>d</sup> Health services coverage is required for all enrolled students.



# Bard Budget Plan Application 2008-2009

- I wish to use the Bard Budget Plan for the 2008-2009 academic year.  
 I have read the terms and conditions and understand and agree to them.

Name of student:

\_\_\_\_\_ last first middle initial

Student's ID number

\_\_\_\_\_

Name of parent or guardian

\_\_\_\_\_

Phone

\_\_\_\_\_ (day) \_\_\_\_\_ (evening)

E-mail

\_\_\_\_\_ PLEASE PRINT CLEARLY

Street

\_\_\_\_\_

City

State

Zip

\_\_\_\_\_

Signature of parent or guardian responsible for payment

Mail completed application with required payment to:

Bard College

Office of Student Accounts

PO Box 5000

Annandale-on-Hudson, NY 12504-5000

Write the student's name and ID number on the check.