



**Statement of Living Expenses
2011-2012**

Student Name: _____ **ID:** _____

A. The income reported on your FAFSA appears to be low. Please complete this form to document your **2010** income.

*If someone, other than you or your spouse, paid for the expense, include the dollar value of the expense in column (2).			
(1) Student/Spouse Monthly Expenses	(2)* 2010 Expense Amount	(3) Who paid or provided support? <i>Please select all that apply.</i>	(4) If Parent and/or Relative/Friend, how much did they provide towards expense?
Mortgage or Rent	\$ _____ per month	<input type="checkbox"/> Self <input type="checkbox"/> Parent <input type="checkbox"/> Relative/Friend	\$ _____ per month
Food	\$ _____ per month	<input type="checkbox"/> Self <input type="checkbox"/> Parent <input type="checkbox"/> Relative/Friend	\$ _____ per month
Incidentals (toiletries, laundry, etc...)	\$ _____ per month	<input type="checkbox"/> Self <input type="checkbox"/> Parent <input type="checkbox"/> Relative/Friend	\$ _____ per month
Utilities	\$ _____ per month	<input type="checkbox"/> Self <input type="checkbox"/> Parent <input type="checkbox"/> Relative/Friend	\$ _____ per month
Transportation (car payment, gas, transit)	\$ _____ per month	<input type="checkbox"/> Self <input type="checkbox"/> Parent <input type="checkbox"/> Relative/Friend	\$ _____ per month
Insurance (car, home, medical, dental)	\$ _____ per month	<input type="checkbox"/> Self <input type="checkbox"/> Parent <input type="checkbox"/> Relative/Friend	\$ _____ per month
Medical/Dental (not covered by insurance)	\$ _____ per month	<input type="checkbox"/> Self <input type="checkbox"/> Parent <input type="checkbox"/> Relative/Friend	\$ _____ per month
Consumer Debt (credit cards, personal loans)	\$ _____ per month	<input type="checkbox"/> Self <input type="checkbox"/> Parent <input type="checkbox"/> Relative/Friend	\$ _____ per month
Clothing/misc (entertainment, gifts, etc...)	\$ _____ per month	<input type="checkbox"/> Self <input type="checkbox"/> Parent <input type="checkbox"/> Relative/Friend	\$ _____ per month
Daycare	\$ _____ per month	<input type="checkbox"/> Self <input type="checkbox"/> Parent <input type="checkbox"/> Relative/Friend	\$ _____ per month
Other:	\$ _____ per month	<input type="checkbox"/> Self <input type="checkbox"/> Parent <input type="checkbox"/> Relative/Friend	\$ _____ per month
Monthly TOTALS	\$ _____		\$ _____
Comments: _____			

B. If you reported '0' for mortgage or rent, explain how this expense was provided in 2010.

Did you or your spouse work in 2010? No Yes If yes, please submit 2010 W-2 forms for you and your spouse.

Did you or your spouse file a federal tax return in 2010? No Yes If yes, please provide a copy of your/your spouse's 2010 federal taxes.

Did you or your spouse receive any of the following in 2010?

<input type="checkbox"/> Bridge/EBT Card \$ _____/per month	<input type="checkbox"/> Soc. Security Benefits \$ _____/per month
<input type="checkbox"/> SSI \$ _____/per month	<input type="checkbox"/> FIA-State Assistance \$ _____/per month
<input type="checkbox"/> Wages \$ _____/per month	<input type="checkbox"/> Financial Aid Refunds \$ _____/per month
<input type="checkbox"/> Other \$ _____/per month, please explain: _____	

Student Signature

Date