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REDUCTION IN FAMILY INCOME
Statement of Living Expenses

Student Name: _____ **ID:** _____

A. You've submitted a request for a reduction in family income for **2011**. Please complete this form to document your **2011** 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)* 2011 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 is/was provided in 2011.

Did you or your spouse receive any of the following in 2011?

- | | |
|--|--|
| <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