



**2008-2009 INCOME STATEMENT**

*To be completed by the student*

Applicants who report low or no income for the year are required to provide the Office of Financial Aid with an estimate of cost of living for the year and the sources from which these costs were met. Please complete this form as accurately as possible.

**Please answer the following questions first. If you answer yes to any, skip the section below and sign the bottom of the form.**

- In 2007, I received enough financial aid to cover all school and living expenses. Yes No
- In 2007, I lived with parents/relatives/friends and did not make house or rent payments for at least six months. Yes No
- In 2007, I received public assistance for at least six months. Yes No

**If you could not answer yes to any of the above questions, complete the following based on January to December 2007:**

STUDENT'S INCOME & RESOURCES (PER MONTH)		STUDENT'S EXPENSES (PER MONTH)	
Employment	\$	Housing	\$
Social Security	\$	Food	\$
AFDC/ADC/TANF	\$	Car/Transportation	\$
Food Stamps	\$	Telephone	\$
Veteran's Benefits	\$	Utilities (gas, electric water)	\$
Child Support	\$	Insurance	\$
Gifts From Family	\$	Clothing	\$
Other (Specify)	\$	Child Care Cost	\$
	\$	Gasoline	\$
	\$	Personal	\$
	\$	Other (Specify)	\$
	\$		\$
<b>TOTAL (PER MONTH)</b>	\$	<b>TOTAL (PER MONTH)</b>	\$

**IF MONTHLY EXPENSES EXCEEDED MONTHLY INCOME, YOU MUST SUBMIT A WRITTEN EXPLANATION. YOUR FINANCIAL AID CANNOT BE PROCESSED WITHOUT THIS REQUIRED STATEMENT.**

\_\_\_\_\_  
 Student's Signature

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Student ID Number

\_\_\_\_\_  
 Printed Name

\_\_\_\_/\_\_\_\_/\_\_\_\_  
 Date of Birth