



Office of Financial Aid
2011-2012
Student's Statement of Support

Student's Name _____ Student ID _____

Based upon the information you provided on your FAFSA, we need more information about how you meet your living expenses and provide more than 50% support for your child/dependent. Please explain below how you meet your financial obligations such as: rent/mortgage, food, utilities, medical costs, child care, transportation, miscellaneous expenses, etc.

1.) Please describe yours and the child/dependent's current living situation.

Five horizontal lines for writing the answer to question 1.

2.) Who provides the child/dependent and your medical insurance?

Two horizontal lines for writing the answer to question 2.

3.) Does the child/dependent have any income or assets? Do you receive any income or assets? If so, how much do you or he/she receive per month? (Please include welfare (TANF), Social Security, unemployment, child support, disability, cash, etc.)

Table with 2 columns: Source of Income, Amount per month. Includes five rows of horizontal lines for data entry.

4.) What monthly expenses do you and/or the child/dependent have and how much are you providing for these expenses? Please itemize these and provide how much the expenses are per month (i.e. diapers, clothing, food, medicine, childcare, etc.).

Type of Expense	Amount per month	Amount you provide
<u>Rent/Mortgage</u>	_____	_____
<u>Food</u>	_____	_____
<u>Utilities</u>	_____	_____
<u>Transportation</u>	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

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|--|-----|----|
| Do you have subsidized housing? | Yes | No |
| Does someone provide housing for you? | Yes | No |
| Do you receive Food Stamps? | Yes | No |
| Does someone provide food for you? | Yes | No |
| Do you receive assistance for utilities? | Yes | No |
| Does someone pay utilities for you? | Yes | No |
| If yes, are the utilities in your name? | Yes | No |

Student's Signature

Date