

Last Name	First Name	M.I.	
Student ID #		Date of Birth	

## 2024-2025 Financial Resources Worksheet

This worksheet is required when a family has an unusually low income or if neither the parent(s) nor student (& spouse) earned any income by working. Please answer all questions with the appropriate amount or "NA" if it does not apply to you.

	<u>Student</u>	Parent(s)/Spouse
What is your monthly housing cost? (mortgage, rent, etc.)		
How is your housing cost paid? (i.e. paid on your behalf or cash given to you.)		
What is your estimated monthly cost of food?		
How is your cost of food paid? (i.e. paid on your behalf, food stamps or cash given to you)		
If you have a car payment, how is it paid? (i.e. paid on your behalf or cash given to you.)		
Do you receive any other income? (please list source and amount)		
Student's Signature	Parent's/Spouse's S	ignature
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**Return Completed Form To:**