

2020-2021 Living Expense Worksheet

You have indicated an unusually low amount of income for you and your family in 2018 on your 2020-2021 FAFSA. We must verify how you were able to live on this amount. Please complete this form and return it to the Financial Aid Office by the requested deadline.

Student's Name _____

Social Security # _____

A. Please indicate the total expenses you and your parent/spouse paid for in 2018. If not applicable, enter "\$0" in the blank.

2018 LIVING EXPENSES PAID (ANNUAL)				
	Parents		Student/Spouse	
Rent/Mortgage	per month:	per year (x12):	per month:	per year (x12):
Utilities	per month:	per year (x12):	per month:	per year (x12):
Food (Do not include Food Stamps)	per month:	per year (x12):	per month:	per year (x12):
Transportation/Insurance	per month:	per year (x12):	per month:	per year (x12):
Other (Specify)	per month:	per year (x12):	per month:	per year (x12):
Total 2018 Expenses *	per month:	per year (x12):	per month:	per year (x12):

B. Please indicate the total amount of income you and your parent/spouse received in 2018 to meet the expenses indicated above. If not applicable, enter "\$0" in the blank

2018 INCOME AND RESOURCES RECEIVED (ANNUAL)		
	Parents	Student/Spouse
Income earned from work (Provide W2 form or proof of earnings)		
Foreign income earned from work (Convert to U.S. dollars)		
Child support received for all children		
Alimony or separate maintenance		
Welfare benefits: AFDC/ADC or TANF		
Supplemental Security Income (SSI)		
Social Security benefits		
Veterans benefits--specify type		
Unemployment compensation		
Disability Benefits other than Social Security		
Pensions or retirements benefits		
Workers' compensation		
Housing, food, or other living allowances for military, clergy, etc.		
Financial Aid refund received		
Loans ___ Gifts ___ Cash Support ___ Received From?		
Other--specify type		
Total 2018 Income *	\$	\$

***Total expenses in Section A should be less than or equal to the total income and resources listed in Section B**

- C. Please explain how you and/or your family lived on little or no resources in 2018. Include any information that will help explain how you and/or your family met basic living expenses in 2018.

D. Certification Statement

I declare, under penalty of perjury, that the information on this form is true, complete and accurate to the best of my knowledge. I also understand that additional documentation may be required based on information reported on my FAFSA or this worksheet.

Student Signature Korey Lynn (Please Sign in Ink)

Date _____

Parent/Spouse Signature Susanne Lynn (Please Sign in Ink)

Date _____