

Student Name: _____

ID# _____

One University Circle, Turlock, CA 95382
Telephone (209) 667-3336 Fax (209) 664-7064

www.csustan.edu/financialaid

2018-2019 INCOME AND EXPENSE WORKSHEET

Please check one:

STUDENT Information

PARENT Information

Answer each of the following questions based on expenses for calendar year 2016:

- Did you receive free housing from a friend, relative, or someone with whom you have a relationship? YES NO
- Did you receive military housing? YES NO
- Did you receive food/groceries from a friend, relative, or someone with whom you have a relationship? YES NO
- Did you receive free childcare from a friend, relative, or someone with whom you have a relationship? YES NO

Any OTHER source of income? _____

List all expenses for calendar year 2016. If few or no expenses are listed, an explanation **IS REQUIRED.**

2016 Student (and Spouse) Expenses	Annual Amount (from January 2016– December 2016)
Rent or mortgage payment	\$ x 12 = total per year
Utilities	\$ x 12 = total per year
Food / Groceries	\$ x 12 = total per year
Transportation	\$ x 12 = total per year
Child Care/ Child Support	\$ x 12 = total per year
Medical Insurance / Expenses	\$ x 12 = total per year
Clothing	\$ x 12 = total per year
Other (Specify):	\$ x 12 = total per year
TOTAL 2016 EXPENSES	\$
TOTAL 2016 INCOME	\$

Please add any clarifying comments regarding your situation that will help with our review. If you listed \$0 in total expenses and/or \$0 in total income, you are REQUIRED to provide an explanation. Attach a separate sheet of paper if necessary (include your name and campus ID at the top of the page).

Certification & Signature

Each person signing below certifies that all of the reported information is complete and correct.

Student Signature _____

Date _____

Parent Signature _____

Date _____

(Parents signature only required if providing parental information)