

Section C- Income and Expense Information

INCOME	Current Calendar Year	Next Calendar Year
Earned Income (e.g. wages, salaries, tips)	\$	\$
Financial Support (cash) received from parent/guardian	\$	\$
Monetary value of any other support (e.g. health insurance, room & board) received from parent/guardian	\$	\$
Monetary value of other support (e.g. room& board) other than parent/guardian (include source)	\$	\$
Amount of other annual income (indicate source)	\$	\$
TOTAL	\$	\$

EXPENSES	Current Calendar Year	Next Calendar Year
Housing	\$	\$
Food	\$	\$
Transportation (e.g. car payments, insurance, gas, maintenance)	\$	\$
Utilities	\$	\$
Child care and/or dependent care	\$	\$
Personal (e.g. clothing, entertainment)	\$	\$
Other (indicate source)	\$	\$
TOTAL	\$	\$

Section D- Certification and Signature

Your request will be reviewed by the Director of Financial Aid, and our office will notify you of the decision in writing.

I certify that the information provided in this petition is true and correct: I understand that if my petition is approved, I must meet with the Financial Aid Director each year prior to filing a FAFSA.

Student Signature

Date

Phone Number