



## Monthly Resource & Expenditure Statement Dependent Student 2021-2022

Student' Name: \_\_\_\_\_

SCCC ID#: \_\_\_\_\_

Please report the **monthly dollar amount paid in 2019** for each expense and provide monthly resources. If your parents are reporting zeroes for all expenses and/or resources, please ask them to provide an explanation of how you support the family, in a signed and dated statement. We may request documentation to confirm expenses and resources. You must **complete all sections** of this form.

| 2019 MONTHLY EXPENSES PAID             |                        |                        |                                |   |
|--|------------------------|------------------------|--------------------------------|---|
| Expense                                | Monthly Expense Amount | Amount Paid By Parents | Amount Paid on Parent's Behalf | If paid on your parent's behalf, by whom.<br>(List name & relationship to you)<br>e.g. Paul Jones (Uncle) |
| Rent/Mortgage & Property Taxes         |                        |                        |                                |   |
| Utilities (phone, gas, electric, etc.) |                        |                        |                                |   |
| Food and Household Supplies            |                        |                        |                                |   |
| Car, Gas, Insurance payments           |                        |                        |                                |   |
| Public Transportation                  |                        |                        |                                |   |
| Health Insurance                       |                        |                        |                                |   |
| Child Care/Clothing                    |                        |                        |                                |   |
| Other                                  |                        |                        |                                |   |
| <b>Total</b>                           |                        |                        |                                |   |

| 2019 MONTHLY RESOURCES |
|------------------------|
|------------------------|

List the monthly resources and the monthly dollar amount used to meet your expenses in 2019. Include resources such as wages, Unemployment, Disability, Social Security benefits, Supplemental Security Income, SNAP, TANF, WIC, Section 8, credit card advances, personal loans, savings, cash support, etc. If someone else provided financial support, list their name and amount provided per month.

| 2019 MONTHLY RESOURCES |                  |
|------------------------|------------------|
| Resources              | Amount Per Month |
|                        |                  |
|                        |                  |
|                        |                  |
|                        |                  |

| CERTIFICATION AND SIGNATURES |
|------------------------------|
|------------------------------|

By signing this worksheet, I (we) certify that all of the information reported on this worksheet is complete and correct.

**Warning:** If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to prison or both. **Computer generated signatures are not acceptable.**

Student Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Parent Signature: \_\_\_\_\_

Date: \_\_\_\_\_