

SOURCES OF INCOME

STUDENT (& SPOUSE)

| Sources of Income | Monthly Amount | Annual Amount |
|---|----------------|---------------|
| Wages | | |
| Business Income | | |
| Interest and Dividends | | |
| Income from trusts or other assets | | |
| Unemployment | | |
| Social Security/SSI | | |
| AFDC or other federal or state benefits (including food stamps) | | |
| Earned income credit and additional child tax credit | | |
| Refunds of state taxes | | |
| Child Support/Alimony received | | |
| Cash gifts given to you | | |
| Estimated value of non-cash benefits (for example housing provided in lieu of wages) | | |
| Estimated value of food you provide for yourself and family (through farming, hunting, fishing, etc.) | | |
| Other Income: (please list) | | |
| | | |
| | | |
| Total | | |

PARENT(S)

| Monthly Amount | Annual Amount |
|----------------|---------------|
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Signatures are required for the individuals who have provided information on this form. A spouse's signature is not required.

Student Signature: _____ *Date:* _____

Parent Signature: _____ *Date:* _____