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OFFICE OF FINANCIAL AID
2011-2012
MONTHLY RESOURCE AND EXPENDITURE STATEMENT

Student Name: _____ Bergen ID# _____

INSTRUCTIONS: *If dependent the questions relate to your parent[s]*

- You must complete SECTIONS I, II, III, IV, and V.
- Return the completed form to the Financial Aid Office within two [2] weeks.
- Please be as accurate as possible when listing expenses since these amounts will be used in determining potential eligibility.
- Only list personal expenses [no business expenses please].
- Report the **ACTUAL** monthly dollar amount **paid in 2010** for each expense. If the expenses vary in amount from month to month, provide the monthly average.
- If someone else [relative, friend, social service agency, etc.,] paid the expense on your behalf, indicate "0" **and** explain the resource **in** SECTION III.

If you completed the 2011-2012 FAFSA as an Independent student, you must answer the following question:

Did you live with your parents in 2010 and were they your only source of financial support?

_____ YES _____ No

If you answered "YES" to the above question, stop here and sign below. You are not required to complete the remainder of this form.

Student's Signature: _____ **Date:** _____

SECTION I: 2010 MONTHLY PAID EXPENSES - [PLEASE LIST ALL EXPENSES YOU OR YOUR PARENT(S) HAD IN 2010]

<u>MONTHLY EXPENDITURES</u>	<u>MONTHLY AMOUNT PAID</u>
1. Home mortgage/rental payments	\$ _____
2. Property Taxes [if applicable]	\$ _____
3. Utilities [phone, gas, electric, water, heating, etc.]	\$ _____
4. Food and household supplies	\$ _____
5. Transportation Expenses	
a. Automobile expenses [monthly payment[s], gas, insurance, maintenance, and/or	\$ _____
b. Monthly train, bus passes or other transportation expenses.	\$ _____
6. Health Insurance	\$ _____
7. Child Care	\$ _____
8. OTHER: _____	\$ _____
<u>TOTAL MONTHLY EXPENSES</u>	\$ _____

[IF YOU LISTED \$0 FOR EXPENSES, PLEASE ATTACH A WRITTEN EXPLANATION TO THIS FORM]

Student Name: _____ Bergen ID# _____

→ **SECTION II: 2010 MONTHLY RESOURCES**

Please list all the resources and the dollar amounts that are used to meet the expenses listed on the front side. Be sure to include all wages, AFDC, TANF, child support, unemployment benefits, SSI, cash support received, etc.

RESOURCES

AMOUNT PER MONTH

- 1. _____ \$ _____
- 2. _____ \$ _____
- 3. _____ \$ _____

TOTAL MONTHLY RESOURCES \$ _____
 (If monthly income does not meet monthly expenses as listed below, please explain on a separate sheet of paper)

→ **SECTION III:** Are any of your expenses in Section #I paid by another person?

_____ YES _____ NO

If yes, complete the information below:

Expenses Paid Month	By Whom (name)	Relationship to You	Amount per Month
			\$ _____
			\$ _____
			\$ _____

TOTAL PAID BY OTHER \$ _____

→ **SECTION IV:** Please restate your assets in the spaces provided [enter amount or zero where applicable. Do not leave blank.]

- | | <u>Student (and spouse)</u> | <u>Parent[s]</u> |
|---|-----------------------------|------------------|
| 1. Cash, savings and checking accounts: | \$ _____ | \$ _____ |
| 2. Other real estate and investments: | \$ _____ | \$ _____ |
| 3. Business | \$ _____ | \$ _____ |

→ **CERTIFICATION – SECTION V:** I {we} certify that the information in Sections I, II, III, and IV above is correct and complete to the best of my {our} knowledge. I also understand the Financial Aid Office may request additional documentation to support my {our} statement/s.

Student's Signature: _____ Date: _____

Parent/Step-Parent's Signature _____ Date: _____
 [if dependent]