

BROOKDALE COMMUNITY COLLEGE
INDEPENDENT STUDENTS WITH DEPENDENTS
MONTHLY EXPENSES AND RESOURCES FOR THE 2009-2010 SCHOOL YEAR

This document is used to determine that you provide more than 1/2/ support for your dependent(s)

STUDENT NAME _____ S.S./ID # _____

Please complete the information below about yourself

SECTION A

2009-2010 STUDENT MONTHLY EXPENSES

*Please state the actual **monthly** cost of each item listed for the period between September 2009 and August 2010.*

1. Home mortgage or rental expense (You must enter an amount if the mortgage or lease is in your name)	
2. Utilities (phone, gas, electric, heating, etc.)	
3. Food and Household supplies	
4. Car payments, insurance, gas and/or other transportation	
5. Medical expenses not covered by insurance	
6. Child care/Day care	
7. Clothing	
8. Credit card payments	
9. Miscellaneous	
10. TOTAL STUDENT MONTHLY EXPENSES	

SECTION B

2009-2010 STUDENT MONTHLY RESOURCES

*Please list all the **monthly** resources that are used to meet the expenses listed in Section A. Be sure to include all wages, AFDC, child support, unemployment benefits, social security benefits, SSI and/ or any **cash** received. YOU MUST ATTACH DOCUMENTATION TO SUPPORT ALL ENTRIES. Examples of acceptable documentation are 2008 Federal Income Tax returns, W2 forms, and 1099 forms, current pay-stubs, statements from agency and/or persons providing the resources.*

<u>Resources</u>	<u>Amount Received per month</u>
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____
TOTAL STUDENT MONTHLY RESOURCES	_____

SECTION C

EXPLANATION (YOU MUST COMPLETE THIS SECTION IF...)

The total resources reported in Section B do not meet the total expenses reported in Section A, please use the space below to explain how the expenses in Section A were met. (If you need more space, please use the reverse side of this form.)

CERTIFICATION

I certify that all the information on this form is correct and complete to the best of my knowledge.

Student Signature _____ Date _____