

BROOKDLE COMMUNITY COLLEGE
2011-2012
DEPENDENT
MONTHLY EXPENSES AND RESOURCES FOR 2010

STUDENT NAME _____ S.S. or ID# _____

PLEASE HAVE YOU PARENTS COMPLETE THE INFORMATION BELOW ABOUT THEMSELVES.

SECTION A

2010 PARENTS MONTHLY EXPENSES (State the actual **monthly** cost of each item listed if these expenses are in your name)

1. Home mortgage or rental expense per month	
2. Utilities (phone, gas, electric, heating, etc.) per month	
3. Food and Household supplies per month	
4. Car payments, insurance, gas and/or other transportation per month	
5. Medical expenses not covered by insurance	
6. Child care/Day care per month	
7. Clothing per month	
8. Credit card payments per month	
9. Other/Personal/Miscellaneous per month	
10. TOTAL PARENTS MONTHLY EXPENSES	

SECTION B

2010 PARENTS MONTHLY RESOURCES-List all the monthly resources that are used to meet the expenses listed in Section A
You must include all wages, AFDC, child support, unemployment benefits, social security benefits, SSI and/ or the persons or agency names providing any cash received on your behalf and the amounts of money paid per month for expenses listed above.

<u>Monthly Resource Name</u>	<u>Amount Received per month</u>
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____
TOTAL PARENTS MONTHLY RESOURCES	_____

SECTION C

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

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.

Parent Signature _____
Date