



STATEMENT OF ACTUAL STUDENT EXPENSES  
DURING SCHOOL YEAR 2024-2025

|  | Monthly<br>Amount | OFFICE<br>USE<br>ONLY |
|--|-------------------|-----------------------|
| <b>Expenses:</b>   |                   |                       |
| Rent/Mortgage ( <b>Attach documentation</b> ) .....  | \$ _____          | \$ _____              |
| Utilities:( <b>Attach documentation</b> )  |                   |                       |
| Electricity .....  | \$ _____          | \$ _____              |
| Heat .....   | \$ _____          | \$ _____              |
| Sewer, water, & garbage .....  | \$ _____          | \$ _____              |
| Internet service .....   | \$ _____          | \$ _____              |
| Telephone .....  | \$ _____          | \$ _____              |
| Transportation:  |                   |                       |
| Commuter bus fare ( <b>Attach receipts</b> ) .....   | \$ _____          | \$ _____              |
| Commuter costs .....   | \$ _____          | \$ _____              |
| Days per week _____ (Fall Semester)  |                   |                       |
| Days per week _____ (Spring Semester)  |                   |                       |
| Days per week _____ (Summer Session)   |                   |                       |
| Miles per day _____  |                   |                       |
| Commuting from _____ to _____  |                   |                       |
| Child Care ( <i>Attach a bill of charges to date or monthly bill or letter from provider outlining hours and charges per day, week or month.</i> ) | \$ _____          | \$ _____              |
| Day Care Provider _____  |                   |                       |
| Names of children in daycare _____   |                   |                       |
| Personal:  |                   |                       |
| Medical insurance ( <b>Attach documentation</b> ) .....  | \$ _____          | \$ _____              |
| Medical/Dental Expenses ( <b>Attach documentation</b> ) .....  | \$ _____          | \$ _____              |
| Miscellaneous. ....  | \$ _____          | \$ _____              |
| Books ( <b>Attach documentation</b> ) .....  | \$ _____          | \$ _____              |
| Other miscellaneous expenses ( <b>Attach documentation</b> ): Do not include credit card bills, car payments, or car insurance.                    |                   |                       |
| _____  | \$ _____          | \$ _____              |
| _____  | \$ _____          | \$ _____              |
| <b>Total:</b>  | <b>\$ _____</b>   | <b>\$ _____</b>       |

**CERTIFICATION:** The person signing below certifies that all of the information reported is complete and correct.

**WARNING:** If you purposely give false or misleading information, you may be fined, sent to prison, or both.

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

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

*Typed signatures not accepted*