Soka University of America – Office of Financial Aid

Family Budget and Income Report (12 months)

Dependent Student

VERIF
2014-15

Please complete all fields on this form using a black or blue ink. Incomplete forms will be returned and will cause a delay in processing your financial aid application.

SUA ID#: _____

Name: _____ _____ _____
Last *First* *M.I.*

Please itemize your (and your spouse's) expenses and financial resources for the period January 1, 2013 through December 31, 2013.

SECTION 1: LIVING EXPENSES

	Amount/Month	Amount/Year	Subtotals
A. Rent/Mortgage/Property Taxes:	$_____	x12 = $_____	
Subtotal (housing costs for entire year)……Section A			$_____
B. Utilities			
1. Gas & Electric	$_____	x12 = $_____	
2. Water	$_____	x12 = $_____	
3. Telephone	$_____	x12 = $_____	
4. Other	$_____	x12 = $_____	
Subtotal (add 1-4)……Section B			$_____
C. Transportation			
1. Gas	$_____	x12 = $_____	
2. Maintenance	$_____	x12 = $_____	
3. Car Payment & Insurance	$_____	x12 = $_____	
4. Bus Fare	$_____	x12 = $_____	
5. Other	$_____	x12 = $_____	
Subtotal (add 1-5)……Section C			$_____
D. Other Expenses			
1. Food	$_____	x12 = $_____	
2. Clothing	$_____	x12 = $_____	
3. Recreation	$_____	x12 = $_____	
4. Medical & Dental	$_____	x12 = $_____	
5. Child Care	$_____	x12 = $_____	
6. Other (not listed above)	$_____	x12 = $_____	
Subtotal (add 1-6)……Section D			$_____
Total Expenses (add Subtotals A-D) ……			$_____

MAILING ADDRESS
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SECTION 2: RESOURCES

Please list your parent's income for the 2013 tax year.

Earned Income…….. $_____

Interest Income Earned…… $_____

Business/Farm Income…… $_____

Unemployment Compensation…….. $_____

Social Security Benefits…….. $_____

Child Support…… $_____

Any Other Untaxed Income…… $_____
Not Reported on 2013 Income Tax Return

Total Resources $_____

- If your family total expenses are greater than their total resources, please provide an explanation of how expenses were met and attach documentation.

Parent Signature_____ Date_____