



Statement of Self-Support

Student Name: _____

ID#: _____

Part I – Explanation

Please explain how you (and/or your family) lived in _____ (year).

Part 2 – Sources of Income

Please indicate your average monthly expenses incurred during the year and the sources from which they were paid. Supply information below for all that applies to your household.

<u>Expense</u>	<u>Per Month</u>	<u>Source of Payment</u>
Rent/House Payment	\$ _____	_____
Electric Bill	\$ _____	_____
Gas Bill	\$ _____	_____
Water Bill	\$ _____	_____
Telephone/Cell Phone Bill	\$ _____	_____
Childcare	\$ _____	_____
Groceries	\$ _____	_____
Car Payment	\$ _____	_____
Car Insurance	\$ _____	_____
Medical/Dental Bill	\$ _____	_____
Medical/Dental Insurance	\$ _____	_____
Personal	\$ _____	_____
Other	\$ _____	_____
TOTAL	\$ _____	_____

Part 3 - Certifications

I/We certify that the above information is true and complete to the best of my\our knowledge. If asked, I/we agree to provide proof of the information given.

Student's Signature: _____ Date: _____

Father's Signature: _____ Date: _____

Or

Mother's Signature: _____ Date: _____