



INDIAN RIVER STATE COLLEGE

Financial Aid

STATEMENT OF LIVING EXPENSES

Student's Name: _____

Student ID: _____

Date of Birth: _____

Academic Year (To be entered by FAO only): _____

On your Free Application for Federal Student Aid, you either did not provide income information or you provided income information that seems unusually low.

Using this form, please indicate how you provided for yourself (and your family if applicable); or if this form is for your parents, how they provided for themselves. If an agency or family/friend provided assistance for you or your parents, then please identify who is helping you (or helped you last year) and how much they are providing for you (or provided for you last year) on a **monthly basis**. _____

If you are not receiving cash benefits, then please indicate the amount of **monthly assistance** you are receiving for the following items. *For example, if your friend or family member pays \$600 in rent and there are four people living in the apartment, including you, then your share of the rent that is being paid on your behalf would be \$150 per month.*

Some items may not apply.

Rent/Mortgage \$ _____

Utilities \$ _____

Food \$ _____

Transportation (Auto) \$ _____

Other (Specify) _____ \$ _____

Other (Specify) _____ \$ _____

Total \$ _____

Student's Signature and Date _____

Parent's Signature and Date _____

(Required for Dependent Students Only)

FAO Comments Only: