Financial Aid

Statement of Family Expenses-Dependent



Student Name ______

Student ID Number _____

Your daughter's financial aid application reported a limited amount of income. We need additional information regarding your expenses and <u>how you paid for these expenses with the reported income</u> to better evaluate your financial need and your ability to contribute toward educational expenses.

Annual Family Expenses	Actual 2013 Expenses	Estimated 2014 Expenses		
1) Mortgage or Rent				
2) Food				
3) Clothing				
4) Transportation (gas, repairs, auto payment)				
5) Insurance				
6) Utilities				
7) Medical and Dental (not covered by insurance)				
8) Loan payments made (identify lender and reason for loan)				
9) Elementary or Secondary Tuition				
10) Other				
TOTAL ANNUAL EXPENSES				

(OVER)

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Please provide a detailed explanation on how you paid your expenses in 2013 with the reported income and how you plan to meet your estimated 2014 expenses.

How much will you (the parent) be able to contribute toward your daughter's 2014-15 educational expenses?

\$_____

I/We certify that the information listed is a complete and accurate breakdown of our estimated expenses. Furthermore, if any of the above information changes, I/we will immediately notify the Saint Mary's College Financial Aid Office in writing of the changes.

Student Signature

Date

Parent Signature

Date

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