

You may mail this information to Shawnee State University, Financial Aid Office  
 940 Second Street, Portsmouth Ohio, 45662 or fax to 740.351.3435

Student Name \_\_\_\_\_

Student ID \_\_\_\_\_

The income reported on your Free Application for Federal Student Aid (FAFSA) does not appear to meet your basic living expenses (i.e. housing, utilities, etc). Additional information is needed to document how your family meets its obligations. Please answer the following questions regarding your monthly expense and income in 2016.

**Please complete the expense and income chart listed below. If the answer is "0", write it in the space. Do not leave any blank lines.**

Parent Living Expenses	Average Monthly Income - 2016
Mortgage or rent	\$ _____
Groceries	\$ _____
Car payment	\$ _____
Gas or transportation	\$ _____
Utilities	\$ _____
Telephone/Cell Phone	\$ _____
Car insurance	\$ _____
Medical/dental	\$ _____
Charge card	\$ _____
Personal (clothes, soap, etc.)	\$ _____
Other payments	\$ _____
Total	\$ _____

Parent Sources of Income	Average Monthly Income - 2016
Gross wages	\$ _____
Pension	\$ _____
Unemployment	\$ _____
Child support	\$ _____
Social security	\$ _____
Welfare benefits	\$ _____
Worker's compensation	\$ _____
Food stamps	\$ _____
Housing allowance	\$ _____
Veteran's benefits	\$ _____
Support from others	\$ _____
Total	\$ _____

If you were living with someone in 2016 who paid for your living expenses (i.e. housing, food, utilities, etc.) check here \_\_\_\_\_

**Complete the information below to show where and with whom you lived during 2016.**

Name	Relationship	Dates lived with
Name	Relationship	Dates lived with

If 2016 monthly expenses exceeded 2016 monthly income, explain how monthly expenses were paid. \_\_\_\_\_

*I hereby certify that the information I have provided is true to the best of my knowledge and acknowledge that making any knowingly false statement to a public official is a crime under Ohio law subject to fines and imprisonment upon conviction.*

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

Date \_\_\_\_\_

Parent Signature \_\_\_\_\_

Date \_\_\_\_\_