

2020–21 Student Income and Expense Form

Student name _____ QU ID# _____

Note: Complete all questions. Do not leave any blank. If income was zero, please indicate "0."

Source of Income (Annual)	2018	2019	Required Documentation
Student - earnings from work (include ALL jobs)	\$	\$	W-2 form (if received)
Spouse, if applicable - earnings from work (include ALL jobs)	\$	\$	
Social Security benefits	\$	\$	1099 form or letter from Social Security
Child support received for all children	\$	\$	Copy of divorce decree, court order, garnished pay stub
Death benefits	\$	\$	Supporting documentation
Alimony received	\$	\$	Proof of income
Other untaxed benefits (such as Workers' Compensation)	\$	\$	Supporting documentation
Benefits other than listed above	\$	\$	Supporting documentation
Cash support for any expenses paid on your behalf	\$	\$	Signed, itemized letter from benefactor
Total Income	\$	\$	

Expenses (Annual)	2018	2019	If expense is covered by funds other than those listed above, please explain the source.
Housing (mortgage/rent)	\$	\$	
Food	\$	\$	
Utilities	\$	\$	
Electricity	\$	\$	
Gas/oil	\$	\$	
Water	\$	\$	
Telephone/cell phone	\$	\$	
Child support paid	\$	\$	
Car payment/public transportation costs	\$	\$	
Auto insurance	\$	\$	
Medical/dental insurance	\$	\$	
Home/renter's insurance	\$	\$	
Total Expenses	\$	\$	

Your signature also acknowledges you have completed the form to the best of your knowledge.

 Student signature (required)

 Date

 Parent signature (required of dependent students)

 Date

 Spouse signature (required if married)

 Date

Please mail, email or fax this signed and dated worksheet to the Office of Undergraduate Financial Aid listed above.