



Student Income & Living Expenses
Assessment Form 2009- 2010

Name (please print): Last First MI

LCCC Student No. : Soc. Sec. No.

Address: Street City State Zip code

Home Phone: Cell Phone:

The income reported on your Free Application for Federal Student Aid (FAFSA) is zero and does not appear sufficient to meet your basic living expenses (i.e. housing, utilities, etc.). You may have additional resources (other than earnings from employment) not included on your FAFSA form allowing you to meet your living expenses.

Please complete sections 1, 2, 3 & 4 on this form. Do not leave anything blank. Indicate a "zero" if necessary. This form will allow SFA to better assess and understand your current financial situation.

SECTION 1:

Please check "yes" or "no" for each question:

- A) Did you receive free housing from a parent, friend, relative, or from someone in which you have a relationship?
B) Did you receive free groceries/food from a parent, friend, relative, or from someone in which you have a relationship?
C) Did you receive free child care from a parent, friend, relative, or from someone in which you have a relationship?

SECTION 2:

List all forms of expenses incurred by you in 2008. If someone else is paying your living expenses, please estimate the financial value of the in-kind support that you are receiving in the blanks below:

Table with 2 columns: Expense Category and Amount. Rows include Rent or mortgage payments, Car payments, Apartment or home insurance, Medical, vision, dental insurance, Food expenses, Gasoline, oil, car repairs, Out of pocket medical expenses, Clothing expenses, and Child car expenses.

All utility expenses	\$
Recreational expenses	\$
Miscellaneous/personal expenses	\$
Other (specify source)	\$

Section 3:

List all forms of income/resources received by you in **2008**. Resources can be monetary gifts or monetary transfers made to you. Estimate your income/resources in the blanks below:

INCOME/RESOURCES	January 2008 through December 2008
Income from work (gross)	\$
Spouses income from work (gross)	\$
Resources from parent(s)	\$
Resources from other relatives	\$
Resources from boyfriend/girlfriend	\$
Resources from partner/life partner	\$
Financial aid received	\$
Unemployment or disability benefits	\$
Child support received	\$
Business, rental, or farm income	\$
Trust fund income	\$
Interest/dividend income	\$
Social Security benefits	\$
Public assistance benefits (TANF)	\$
Subsidized housing	\$
Food stamps	\$
Veterans benefits	\$
Other (specify source)	\$

Please provide any additional information regarding your situation that will help with our review:

SECTION 4:

All of the information provided on this form is true and correct to the best of my knowledge. If requested, I agree to provide LCCC Financial Services Center with documentation of the information given on this form. I give LCCC Financial Services Center permission to correct my **2009-2010** FAFSA with appropriate information from this form. I understand that if I purposely give false or misleading information to be used on my ISIR/SAR, I may be subject to a \$20,000 fine, a prison sentence, or both.

Student Signature

Date