

SALEM STATE COLLEGE  
FINANCIAL AID OFFICE

2007-2008 Income Expense Worksheet

Name: \_\_\_\_\_

Date: \_\_\_\_\_

Student ID #: \_\_\_\_\_

Status: Independent

***Your*** income as reported on your financial aid application appears low. Please complete this worksheet so that we may accurately assess ***your*** financial situation. The income and expense information pertains to the ***year ending 2006***.

INCOME		EXPENSES	
Earnings from Work	\$	Rent (If "0" please explain)	\$
		_____	
		_____	
		_____	
Unemployment Benefits	\$	Utilities	\$
AFDC	\$	Food	\$
General Relief	\$	Clothing	\$
Food Stamps	\$	Transportation	\$
Social Security	\$	Personal	\$
Veterans Benefits	\$	Others (List)	
		_____	\$
Rehabilitation	\$		\$
Rental Subsidy	\$		\$
Child Support	\$		
Support from Others (specify source)	\$		\$
_____			
Other Income (specify Source)	\$		\$
_____			
Total	\$	Total	\$

If expenses exceed income, please provide a detailed written explanation as to how your expenses were met.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_