



FAMILY Expense & Resource Worksheet for Calendar Year 2019

List your FAMILY'S monthly expenses below and how you/they met living expenses since little to no income was reported on the FAFSA. Types of expenses are listed in the first column. Enter your monthly amounts in the second column. If an item in the expense column does not apply, enter Not Applicable (NA) in the second column. In the third column, provide the name and relationship of the person who paid the expense or provided the item for you. If you paid the cost, enter "self" in the third column and the resource(s) used to cover these expenses in the fourth column.

Student Name (please print) PSU ID# Phone #

Complete and return this form to our office. Your financial aid application may not be processed until this form has been submitted. Attach a separate sheet if you feel that further explanation is necessary.

Table with 4 columns: (1) Expenses for: Family of Student, (2) Family's monthly cost, (3) Name(s) on Account, (4) Who paid for this item? What resource was used? (Ex: Social Security, pension, weekly paycheck, SNAP, relatives). Rows include Housing, Utilities, Telephone, Transportation, Food, Insurance, Medical, Child Care, Credit Cards, and OTHER.

Please sign and return this worksheet. By signing this worksheet, I (we) certify that all of the information reported to qualify for federal student aid is complete and accurate. Warning: If you purposely give false or misleading information, you may be fined up to \$20,000, sent to prison, or both.

Student Signature Date Spouse Signature (optional) Date

Parent 1 Signature Date Parent 2 Signature Date