



2017-2018 Household Expenses/Benefits Summary

Student Name: _____ **Westmoreland Student ID#** _____

The income you reported on your FAFSA (Federal Application for Federal Student Aid) appears to be insufficient to support your household size. **Independent students and parents of dependent students** are required to complete this form in its entirety to clarify how living expenses are currently being met. If you cannot determine these amounts, we will use the poverty guideline levels as reported in the Federal Register based on the number in your household. **Westmoreland County Community College may submit updates or corrections to your FAFSA to reflect the information on this form.**

Please read the following information before completing this form:

- Each chart is a statement of MONTHLY amounts.
- Enter an AMOUNT for the expenses if someone **outside of your household** provides housing such as rent, utilities and/or food. You will write the amount of their support for each item.
- If someone **within your household** provides housing such as rent, utilities and/or food, please provide name/relationship of person paying for the monthly expense.
- If you do not have an expense for an item, please write “NONE.”
- Transportation includes car payments, gasoline, bus fare, etc.
- Personal expenses include things such as haircuts, clothing, dining out, movies, etc.
- Miscellaneous expenses include monthly expenses that are not listed elsewhere on this form.
- When reporting child support, Social Security, TANF, VA, Medicaid, or SSI benefits, report the current total monthly amount received for **ALL** family members in the household.

Monthly Expense	Amount	Monthly Benefits	Amount
Rent/Mortgage	\$	Income from Work	\$
Utilities	\$	Child Support/Alimony	\$
Groceries	\$	TANF	\$
Phone (Cell/Landline)	\$	Food Stamps	\$
Child Care	\$	Social Security/Disability	\$
Transportation	\$	VA Benefits	\$
Insurance (Car/Health)	\$	Medicaid	\$
Personal	\$	Workers' Compensation	\$
Miscellaneous	\$	Family Members/Others	\$
	\$	Other Income	\$
Total Expenses	\$	Total Benefits	\$

Explanation of how living expenses are met:

ELECTRONICALLY GENERATED SIGNATURES CAN NOT BE ACCEPTED.

Student Signature: _____

Date: _____

Parent Signature (if dependent): _____

Date: _____

(Must be signed by parent whose information is provided on the FAFSA).

Please allow two (2) business days for documents to be posted in your student portal and/or to confirm receipt.