

## BUDGET/RESOURCE WORKSHEET 2014-2015

Financial Aid

Student Name:	EXAMPLE	ID #: Z <u>12345678</u>	

Due to the low amount of income reported on the FAFSA, additional information is required before the Verification process can be completed. Fill out the chart below with your household's 2013 **ANNUAL** income and expenses.

## THE TOTAL ANNUAL INCOME MUST BE GREATER THAN OR EQUAL TO THE TOTAL ANNUAL EXPENSES DO NOT LEAVE ANY BLANKS. ENTER "0" OR "NA."

Annual Income	2013 Amount	Annual Expenses	2013 Amount
Parent income Not Monthly (Dependent students)	\$ 50,000	Not Monthly Housing	\$ 12,000
Student income (and spouse income, if married)	\$ 3,000	Utilities	\$ 4,800
Savings	\$ 5,000	Transportation	\$ 3,600
Credit card/loans	\$ n/a	Food	\$ 10,000
Child support	\$ n/a	Medical	\$ 2,000
Social Security	\$ n/a	Entertainment	\$ 2,000
SNAP(Food Stamps):	\$ n/a	Communication (phone, internet, etc.)	\$ 2,500
SSI/TANF/Welfare:	\$ n/a	Debt payments	\$ 200
Disability:	\$ n/a	School expenses	\$ 3,000
Unemployment:	\$ n/a	Clothing:	\$ 1,000
Family/Friend Support:	\$ n/a	Other:	\$ n/a
Other:	\$ n/a	Other:	\$ n/a
2013 Total income be greater than	\$ 58,000	2013 Total Expenses this amount	\$ 41,100

Briefly explain your family's financial situation. The purpose of this form is for a student to explain how a family is able to live on little to no income. Student should include any special circumstances, changes, living or transportation arrangements, and special assistance in this section. If the Dept. of Education were to question their expenses, this form should be able to explain it.

By signing below, I certify that all information reported on this worksheet is complete and correct.

Student's signature

Date

needed if student is dependent

Parent's signature (Dependent students)

Date



Parent's signature (Dependent students)

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		THAN OR EQUAL TO THE TOT ANKS. ENTER "0" OR "NA.'	
Annual Income	2013 Amount	Annual Expenses	2013 Amount
Parent income (Dependent students)	\$	Housing	\$
Student income (and spouse income, if married)	\$	Utilities	\$
Savings	\$	Transportation	\$
Credit card/loans	\$	Food	\$
Child support	\$	Medical	\$
Social Security	\$	Entertainment	\$
SNAP(Food Stamps):	\$	Communication (phone, internet, etc.)	\$
SSI/TANF/Welfare:	\$	Debt payments	\$
Disability:	\$	School expenses	\$
Unemployment:	\$	Clothing:	\$
Family/Friend Support:	\$	Other:	\$
Other:	\$	Other:	\$
2013 Total Income	\$	2013 Total Expenses	\$
fly explain your family's finan	cial situation:		

Office of Financial Aid | Oral Roberts University | 7777 South Lewis Avenue | Tulsa, OK 74171 | phone 918.495.6510 | fax 918.495.6803 Revised 09.19.13 orufinaid@oru.edu

Date