

CASH FLOW WORKSHEET

STUDENT'S NAME _____

In order to continue with our assessment of your need, we are requesting the following information. Enter '0' for items that do not apply. **USE 2007 INCOME AND EXPENSE FIGURES.**

INCOME: (Amount per month)

Salary	_____	
Interest	_____	
Dividends	_____	
Rental Income	_____	
Business Income	_____	
Social Security	_____	
Pension	_____	
Alimony	_____	
Child Support	_____	
Unemployment Insurance	_____	
Disability	_____	
Other Income (Specify)	_____	_____

TOTAL INCOME	_____	

FIXES EXPENSES: (Amount per month)

Mortgage/rent	_____	
Utilities	_____	
Real Estate Taxes	_____	
Insurance Premiums	_____	
Loan Payments (specify)	_____	_____

Credit Card Payments	_____	_____
(Specify and indicate minimum monthly payment)		_____
TOTAL FIXED EXPENSES	_____	

FLEXIBLE EXPENSES: (Average amount per month)

Food	_____	
Clothing	_____	
Commuting/Transportation	_____	
Child Care	_____	
Education	_____	
Investment Savings	_____	
Other (specify)	_____	_____

TOTAL FLEXIBLE EXPENSES:	_____	

TOTAL FIXED PLUS FLEXIBLE EXPENSES:

_____ (Should equal fixed and flexible)

If your Total Expenses exceed your Total Income, please attach a letter explaining how you pay all of your expenses each month.