



Financial Aid Office \* 1200 E. Broadway \* Columbia, MO 65215 \* 573-876-7106 \* 573-876-2320 FAX

### Itemization Worksheet for School Year 2011 - 2012

According to the information you reported on the FAFSA, your income appears to be unusually low. Please complete this form to clarify how you and/or your family were supported in 2010.

#### Expenses

Type of Expense	Per Month	Per Year
Tuition		
Rent/mortgage payment		
Utilities		
Groceries/Meals out		
Housekeeping supplies/misc.		
Transportation & Expenses		
Medical (doctor, dentist, insurance)		
Personal (clothing, baby's needs etc.)		
Other (describe):		

#### Total Expenses

#### Income

Type of Income	Per Month	Per Year
Welfare		
TANF		
Food Stamps		
Subsidized Housing		
Social Security (S.S.I. Survivor, etc.)		
Support from Relatives/Friends		
Financial Aid (student loans, grants, etc.)		
Other (please list/explain)		

#### Total Income



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**Student signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Print Name:** \_\_\_\_\_ **SSN:** \_\_\_\_\_

**Parents Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
(for Dependent Students only)