



Answer each question regarding the student and if applicable, the students' supporting parent(s). Visit <https://www.ohio.edu/financial-aid/forms> for directions on submitting your forms using our Secure Upload Portal, mailing, or faxing.

\_\_\_\_\_  
**Student Name**

\_\_\_\_\_  
**Student PID (Pxxxxxxxx)**

\_\_\_\_\_  
**Written Student Signature (Electronic Signature Not Accepted)**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Written Parent Signature (Electronic Signature Not Accepted)**

\_\_\_\_\_  
**Date**

(Parent signature required for dependent students)

Your 2022-2023 Free Application for Federal Student Aid (FAFSA) indicated a household being supported with minimal resources. Additional information is needed to document how your family meets its monthly obligations. Please answer the following questions regarding monthly expenses and income in your and/or your parent(s) home in 2020. **Further processing of your aid application will not occur until we receive the information requested below.**

**I, the student, currently reside with my parents?** Yes  No

**2020 Expenses:**

**Student/Spouse**

**Parent**

(Required for dependent student only)

Rent/mortgage per month?

\$ \_\_\_\_\_

\$ \_\_\_\_\_

Utility bills per month  
(include heat, electric, water, etc.)

\$ \_\_\_\_\_

\$ \_\_\_\_\_

Grocery costs per month?

\$ \_\_\_\_\_

\$ \_\_\_\_\_

Childcare costs per month?  
(if applicable)

\$ \_\_\_\_\_

\$ \_\_\_\_\_

Vehicle costs per month?  
(include payments, gasoline, repairs, etc.)

\$ \_\_\_\_\_

\$ \_\_\_\_\_

Other monthly expenses?

\$ \_\_\_\_\_

\$ \_\_\_\_\_

**2020 Income:**

Please list sources of income for 2020, number of months it was received, and amount received monthly. Include earnings from work, assistance from Human Services agencies (such as TANF, food stamps, HUD, HEAP, etc.), and other non-taxed income or benefits (such as SSI, Social Security, child support, etc.). Also include amounts paid on your parent's behalf by someone else.

**Income Earner**

**Source of Income**

**Number of Months**

**Monthly Amount**

(Student/Spouse/Parent)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\$ \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\$ \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\$ \_\_\_\_\_

**If you or your parent's 2020 income did not meet expenses, please explain how those expenses were met**

\_\_\_\_\_  
\_\_\_\_\_