

Student Expense/Resource Listing

STUDENT NAME _____ NEW SCHOOL ID N _____

Part One: Yearly Income/Resources

Dates included: January 1, 2008 to December 31, 2008 (Please use actual & best estimated figures possible)
Include spousal income section if you are married.

	Your Income Information:	Your Spouse's Income Information (if applicable)
Work	\$	\$
Interest/dividends on investments	\$	\$
Cash support you receive from family, friends, others	\$	\$
Social Security/Disability	\$	\$
Other income	\$	\$
Loans	\$	\$
 Total YEARLY income	 \$ _____	

Part Two: Monthly Expenses

Your Monthly Expenses:	How you pay for these expenses:		
	From earnings	From savings	Someone else pays this expense (i.e. spouse, friend, other family member, associate etc.)
Rent or Mortgage	\$	\$	\$
Utilities (heat, gas, light)	\$	\$	\$
Food	\$	\$	\$
Phone	\$	\$	\$
Medical expenses (insurance, co-payments, medications)	\$	\$	\$
Car	\$	\$	\$
Transportation	\$	\$	\$
Other expense: _____	\$	\$	\$
School-related expenses (tuition, books and supplies)	\$	\$	\$
	\$	\$	\$
Total:	\$	\$	\$

Student Signature _____ Date _____

Return Completed Form to: Student Financial Services, 72 Fifth Ave, New York, NY 10011
Tel: 212-229-8930 Fax: 212-229-5919 E-mail: sfs@newschool.edu