



Student's Name: _____ PMC ID #: _____

Please provide full budget information (both expenses and resources) for the calendar year 2010 for the student, spouse (if applicable) and any other people for whom you provide more than half of their support (e.g., dependent children). NOTE: Please write "N/A" for any item below that is not applicable. Resources should be equal to or more than expenses. If not, a full explanation must be provided.

EXPENSES		TOTAL ANNUAL AMOUNT	RESOURCES		TOTAL ANNUAL AMOUNT
Rent / Mortgage	\$		Parent(s) Wages	\$	
Food / Clothing	\$		Student's Wages	\$	
Household (Utilities, Laundry, etc.)	\$		Interest/Dividend/Savings Income	\$	
Transportation / Car	\$		Social Security Benefits	\$	
Medical / Dental	\$		AFDC	\$	
Debt Payments	\$		Child Support Received (all children)	\$	
Educational Costs	\$		Alimony	\$	
Other (itemize below):	\$		Veterans' Benefits	\$	
_____			Unemployment Compensation	\$	
_____			Pensions	\$	
_____			Worker's Compensation / Disability	\$	
			Other (itemize below):	\$	

TOTAL 2010 EXPENDITURES	\$		TOTAL 2010 RESOURCES	\$	

We certify that the information listed above is a complete and accurate budget for the calendar year 2010.

Student's Signature: _____ Date: _____

Spouse's Signature: _____ Date: _____