

Financial Aid Worksheet – Dependent  
2011-2012

Name: \_\_\_\_\_

Student ID: \_\_\_\_\_

The student should review each question carefully and circle the appropriate answer. Please provide all additional documentation, if indicated below, when submitting this form. This form is **required**, in addition to the other necessary documents, in order for your Brazosport College Financial Aid file **to be considered complete**.

**A. INCOME & RESOURCES**

1. Do you **currently** reside with someone? **YES** or **NO**

a. If **NO** move to question #2

b. If **YES** provide the following information about that person:

**Name:** \_\_\_\_\_ **Relationship:** \_\_\_\_\_

**Length of time you have lived there:** \_\_\_\_\_

2. What is the total number of people in the household (including student)? \_\_\_\_\_

a. List each member of the household

NAME	RELATIONSHIP	AGE
	<b>STUDENT</b>	

3. Were you employed in **2010**? **YES** or **NO**

Were your parent(s) employed in **2010**? **YES** or **NO** or **NA**

a. If **both** answers are **NO** move to question #4

b. If **YES(student)**: List dates of employment: \_\_\_\_\_

How many **hours per week** did you work? \_\_\_\_\_ hrs What were your hourly wages? \$\_\_\_\_\_/hr

c. If **YES(parent)**: List dates of employment: \_\_\_\_\_

What was their monthly income? \$\_\_\_\_\_/mo

4. Are you **currently** employed? **YES** or **NO**

Is your parent(s) **currently** employed? **YES** or **NO** or **NA**

a. If **both** answers are **NO** move to question #5

b. If **YES(student)**: What are your hourly wages? \$\_\_\_\_\_/hr

How many **hours per week** do you normally work? \_\_\_\_\_ hrs

c. If **YES(parent)**: What is their monthly income? \$\_\_\_\_\_/mo

5. Did you/parent receive or pay child support in **2010**? **YES** or **NO**

a. If **NO** move to question #7

b. If **YES**: List amount **received**: monthly amount \$\_\_\_\_\_

List amount **paid**: monthly amount \$\_\_\_\_\_

6. Is the child support received and/or paid through the Texas Attorney General's office? **YES** or **NO**

a. If **NO**: Write statement that states how much you receive per month and the total for the **2010** year and submit with this form.

b. If **YES**: visit <https://childsupport.oag.state.tx.us/wps/portal/csi> or call **800-687-7572** and request statement of amount received and/or paid from January 1 – December 31, **2010**. Submit the payment statement with this form.

7. Do you/parent **currently** receive or pay child support? **YES** or **NO**

a. If **NO** move to question #9

b. If **YES**: List amount **received**: monthly amount \$\_\_\_\_\_

List amount **paid**: monthly amount \$\_\_\_\_\_

8. Is the **current** child support received and/or paid through the Texas Attorney General's office? **YES** or **NO**

a. If **NO**: Write a statement that states how much you receive per month and the total for the **2011** year and submit with this form.

b. If **YES**: visit <https://childsupport.oag.state.tx.us/wps/portal/csi> or call **800-687-7572** and request statement of amount received and/or paid from January 1, 2011 – present. Submit the payment statement with this form.

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- 20.** Are you or anyone in your household **currently** receiving Social Security Benefits?    **YES**    or    **NO**  
 a. If **NO** move to question #21  
 b. If **YES**: List the names of each person and the amount they receive ( \*attach award statement)

NAME	RELATIONSHIP	AMOUNT RECEIVED

- 21.** In **2010** did anyone in your household receive Unemployment Benefits?    **YES**    or    **NO**  
 a. If **NO** move to question #22  
 b. If **YES**: complete the table below (\*attach end of year statements)

NAME	RELATIONSHIP	AMOUNT RECEIVED

- 22.** Are you or anyone in your household **currently** receiving Unemployment Benefits?    **YES**    or    **NO**  
 a. If **NO** move to Part B  
 b. If **YES**: List the names of each person and the amount they receive ( \*attach award statement)

NAME	RELATIONSHIP	AMOUNT RECEIVED

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**B. ESTIMATE YOUR AVERAGE MONTHLY EXPENSE BUDGET**

For the following questions please list the average monthly amount to the best of your knowledge. **Please indicate if someone other than the student paid the following amounts.** If you need more space, attach a separate page or print neatly on the back of this form.

<p><b>Food:</b></p> <p><b>2010:</b> \$ _____/month Who paid this? _____ How many months? _____</p> <p><b>Current:</b> \$ _____/month Who paid this? _____ How many months? _____</p>	<p><b>Housing ( check one):</b> _____ <b>Rent</b> _____ <b>Mortgage</b> _____ <b>Own</b> _____ *If the parent lives with someone else, list their amounts</p> <p><b>2010:</b> \$ _____/month Who paid this? _____ How many months? _____</p> <p>Was student and/or parent on subsidized housing? <b>YES NO</b></p> <p><b>Current:</b> \$ _____/month Who paid this? _____ How many months? _____</p> <p>Is student and/or parent on subsidized housing? <b>YES NO</b></p>
<p><b>Utilities(includes power, water, and natural gas):</b></p> <p><b>2010:</b> \$ _____/month Who paid this? _____ How many months? _____</p> <p><b>Current:</b> \$ _____/month Who paid this? _____ How many months? _____</p>	<p><b>Phone (check one):</b> _____ <b>Home</b> _____ <b>Cell</b> _____ <b>Both</b> _____ <b>N/A</b></p> <p><b>2010:</b> \$ _____/month Who paid this? _____ How many months? _____</p> <p>Was this _____</p> <p><b>Current:</b> \$ _____/month Who paid this? _____ How many months? _____</p>
<p><b>Auto (check one):</b> _____ <b>Payments</b> _____ <b>Paid off</b> _____ <b>N/A</b></p> <p><b>2010:</b> \$ _____/month Who paid this? _____ How many months? _____</p> <p><b>Current:</b> \$ _____/month Who paid this? _____ How many months? _____</p>	<p><b>Auto Insurance:</b></p> <p><b>2010:</b> \$ _____/month Who paid this? _____ How many months? _____</p> <p><b>Current:</b> \$ _____/month Who paid this? _____ How many months? _____</p>

**I certify that all of the information on this form is true and complete to the best of my knowledge.**

**Parent Signature:** \_\_\_\_\_

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

**Student Signature:** \_\_\_\_\_

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

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