

Financial Data

Name _____

School Year _____

ANNUAL EXPENSES

Church/charity _____

Tuition (number of credit hours for the year: _____) _____

Field Education Fees _____

Books and Supplies _____

Housing Buying Renting _____

Utilities: Electric, Gas, Tel. Water/sewer _____

Property Tax _____

Maintenance _____

Insurance - house/contents _____

Clothing _____

Household Incidentals _____

Health Insurance _____

Life Insurance _____

Medical & Dental (not covered by insurance) _____

Child Care _____

Christian school tuition _____

Vehicle: Make _____ Year _____

Gas, Oil and Maintenance _____

Vehicle Insurance _____

Recreation _____

Professional Services _____

Debt Obligations _____

Other _____

TOTAL EXPENSES _____

ANNUAL INCOME

Applicant's Income _____

Spouse's Income _____

Support from Extended Family _____

Support from Church _____

Scholarship/Grants (not Classis) _____

Loans _____

Other _____

Total Income _____

Total Expenses _____

Difference _____

ASSETS

Savings, Stock, Bonds, etc.
House Equity
Vehicle Value
Other

Total

LIABILITIES

House Mortgage
Vehicle Loan
Loans
Other

Total

All of the above information is true to the best of my knowledge.
I understand that this information will be kept in confidence by the Leadership

Signed _____