

# INDEPENDENT STUDENT EXPENSE BREAKDOWN WORKSHEET

Student's Name \_\_\_\_\_

WCU ID # \_\_\_\_\_

The West Chester University Financial Aid Office is requesting this form because you either reported zero or very low income on the FAFSA. Please complete all sections of this form. **Do not leave any items blank. Enter "0" if applicable.**

**Please check if you received any of the following during 2019:**

- Food stamps                       TANF or other cash from welfare                       WIC                       Free or Reduced Lunch  
 SSI                       Social Security Disability                       Social Security Retirement Income                       Social Security Survivor Benefits

**In 2019, did you receive cash assistance from any other source not listed on this form?**

- No other sources of cash assistance received in 2019  
 Yes, from child support payments. Amount \$ \_\_\_\_\_  
 Yes, from a spouse, significant other or friend. Amount \$ \_\_\_\_\_  
 Yes, from parents or other family members. Amount \$ \_\_\_\_\_  
 Yes, from an outside agency or provider. Amount \$ \_\_\_\_\_

**Please List your monthly living expenses. Do NOT list "cash" list the source (i.e. work, savings, specific family member, etc.)**

Expenses	Monthly 2019 Amount	Source or Payment
<i>Ex. Housing</i>	<i>\$ 100</i>	<i>TANF</i>
Housing		
Food		
Transportation		
Car Payment & Insurance		
Gas & Tolls		
Public Transportation		
Health Care		
Child Care		
Other expenses		

**The information I have provided on this Expense Breakdown Verification Worksheet is complete and correct to the best of my knowledge.**

Student Signature \_\_\_\_\_

Date \_\_\_\_\_