



INCOME/EXPENSE STATEMENT 2020-2021

Financial Aid

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A CAMPUS OF HOPE INTERNATIONAL UNIVERSITY

Please provide a detailed breakdown of your family's 2018 expenses and income source. The Office of Financial Aid is requesting this data because your family income reported on your 2020/2021 FAFSA does not appear to be sufficient to meet living expenses.

Student's Name: _____ ID#: _____

A. 2018 Expenses

Please itemize your household 2018 expenses as follows:

	Monthly		Yearly
2018 Mortgage or rent	\$ _____	x12	\$ _____
2018 Utilities	\$ _____	x12	\$ _____
2018 Phone/Cell Phone	\$ _____	x12	\$ _____
2018 Food/Personal Expenses	\$ _____	x12	\$ _____
2018 Car Payment	\$ _____	x12	\$ _____
2018 Medical/Dental Insurance/Exp.	\$ _____	x12	\$ _____
2018 Gas/Vehicle Insurance	\$ _____	x12	\$ _____
2018 Child Care	\$ _____	x12	\$ _____
2018 Other Expenses	\$ _____	x12	\$ _____
Total Expenses			\$ _____

B. 2018 Income Sources

Please list dollar amount regarding sources of income in 2018 beyond employment: (Ex: SSI, SNAP, Child Support received, unemployment, family contribution, etc.) Please attach documentation of untaxed income.

Source	Yearly Dollar Amount
_____	_____
_____	_____
_____	_____
Total Income	\$ _____

C. If your yearly Total Expenses (section A) exceed your yearly Total Income Source (section B), please list resources used to cover the difference.

In 2018 did you receive free housing: Yes No

If yes, how much would it have cost you per month to rent a similar place \$ _____

Address of residence _____

In 2018 were you given money to pay bills and/or groceries: Yes No

If yes, what was the total amount contributed in 2018 \$ _____

Student Signature

Date

Parents Signature

Date