

Income Worksheet

University of South Alabama
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Student Name _____ Student Number _____

The information provided on this form is that of the Student Parent

Do you receive any of the following?
(Check all that apply and provide amounts received where requested)

Section 8 Housing, HUD, or Income Sensitive Rent
Social Security benefits or Social Security Insurance (SSI)
AFDC/ADC/TANF
Food stamps
Medicaid
WIC

Disability Benefits	per month \$ _____	or per year \$ _____
Child Support	per month \$ _____	or per year \$ _____
Alimony	per month \$ _____	or per year \$ _____

Are you married?	Yes	No
Do you have a roommate?	Yes	No
Do you live with friends or relatives?	Yes	No
Do you live in a residence owned by friends or relatives?	Yes	No

What do family and/or friends pay on your behalf?

Check all that apply and provide amounts received. **DO NOT** list your expenses in this section.
List **ONLY** the things that are paid for on your behalf.

Rent	per month \$ _____	Child care	per month \$ _____
Food	per month \$ _____	Transportation	per month \$ _____
Utilities	per month \$ _____	Personal Expenses	per month \$ _____
Other	per month \$ _____		