

Dependent

2025-2026 Monthly Expense and Resource Worksheet

A. Student Information

Last Name F	First Name	M.I.	MCCC Student ID Number	
B. 2023 Monthly Paid Expenses				
on the chart below. If your parents report explanation of how they financially supp	rt zeroes for all expe ort the family in a si	nses and/or resource gned and dated state	ount per month) for the year for each expense es, you must have them provide a written ement. The Financial Aid Office may request You must complete all sections of this form.	
Expense	Amount Paid by Student/Parent	Amount Paid on Behalf of Student/Parent	If paid on behalf, by whom (list name and relationship)	
Rent/Home Mortgage and Property Taxes	\$	\$		
Utilities (phone, gas, electric, water, etc.)	\$	\$		
Food, Household Supplies	\$	\$		
Car Payments, Gas, Insurance	\$	\$		
Public Transportation	\$	\$		
Health Insurance	\$	\$		
Childcare, Clothing	\$	\$		
Other	\$	\$		
Total Monthly Expenses	\$	\$		
unemployment, disability, Social Security be personal loans, savings, cash support, etc. If	nt used to pay your expendents, Supplemental S	ecurity Income, SNAP	ude resources such as wages earned from work, TANF, WIC, Section 8, credit card advances aid expenses on your family's behalf, list their	
name and amount they provided for the year				
Resource		Yearly Amount		
1.		\$		
2.		\$	\$	
3.		\$		
4.		\$	\$	
Total Annual Resources		\$	\$	
D. Certification and Signatures				
Each person signing this form certifies that all informati	on reported on it is complete	and correct. The student and	d at least one parent must sign and date.	
Student Signature	Date		WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, be	
Parent Signature	Date	sentence	sentenced to jail, or both.	