JOHNS HOPKINS UNIVERSITY

Homewood Schools
Student Financial Services

2019-20 Parent Monthly Income and Expense Statement

_____ Student's Printed Name

_____ Student's ID Number

Section I: Monthly Living Expenses

Parent: Next to each item, fill in the dollar amount of your average monthly living expenses. If you share living expenses with others, indicate only that portion of expenses which you pay. If an expense occurs other than monthly, please convert it to a monthly average. Report only your living expenses. Fill in all items. If an item does not apply, indicate this by writing "N/A".

- Do you share living expenses with others? ☐ YES ☐ NO
  If YES, with whom? _____
- Do you pay rent? ☐ YES ☐ NO
- Do you have a mortgage payment? ☐ YES ☐ NO

If you pay neither rent nor a mortgage payment, please explain: _____

Living Expenses that You Pay:

	Average amount per month in 2018:	Average amount per month in 2019:
1. Housing – rent or mortgage	$_____	$_____
2. Food and household supplies	$_____	$_____
3. Utilities (gas, electric, phone, water, heating)	$_____	$_____
4. Gasoline and auto maintenance	$_____	$_____
5. Public transportation	$_____	$_____
6. Medical/health expenses NOT covered by insurance	$_____	$_____
7. Insurance (home, car, health, life, etc.)	$_____	$_____
8. Car payments (Make:_____; Year:_____)	$_____	$_____
(Make:_____; Year:_____)	$_____	$_____
9. Other: _____	$_____	$_____
10. Other: _____	$_____	$_____
11. Other: _____	$_____	$_____
Total monthly living expenses:	**$_____**	**$_____**

Section II: Sources of Income

Please list all sources of income that are used to meet the living expenses you listed in Section I. (Total monthly income should equal or exceed total monthly living expenses. If not, please explain in Section III below.)

	Average amount per month in 2018:	**Average amount per month in 2019:**
Parent wages/salary	$_____	$_____
Income from business	$_____	$_____
Child support	$_____	$_____
Housing support (military, clergy, etc.)	$_____	$_____
Social Security benefits	$_____	$_____
Supplemental Nutrition Assistance Program (SNAP)	$_____	$_____
Supplemental Security Income (SSI)	$_____	$_____
Support from family members	$_____	$_____
Temporary Assistance to Needy Families (TANF)	$_____	$_____
Unemployment benefits	$_____	$_____
Veterans benefits	$_____	$_____
Other:_____	$_____	$_____
Other:_____	$_____	$_____
Other:_____	$_____	$_____
Total monthly income:	**$_____**	**$_____**

Section III: Additional Information

Please provide any additional information that would help us understand how you meet your living expenses. If more space is needed, provide a separate page with the student's name and ID number at the top.

Comments:

_____

_____

_____

_____ Parent Signature

_____ Date

Current students should submit completed forms electronically using the document upload tool available via SIS. After logging into SIS, navigate to Financial Aid, Online Forms, and select "FA - Document Upload Form." All tax documents must be submitted to IDOC at idoc.collegeboard.org.

Contact our office at finaid.jhu.edu/contact for more information.