



One College. Many Opportunities.

ESTIMATION OF IN-KIND SUPPORT

DEPENDENT STUDENT
(Parents must complete)

INDEPENDENT STUDENT
(Student must complete)

Date: _____

Academic Year: 2017-2018

Student Name: _____ ID: _____

I (or my family) reported an unusually low income on my Student Aid Report (SAR). My living expenses for 2015 were covered by (please check the appropriate box):

- Parent(s)
- Friends
- Others (Relatives)

This may have included grocery money, rent, utilities, car insurance, etc. The value of the cash support for the calendar year 2015 received to cover the following items:

- Housing _____
- Utilities _____
- Food _____
- Transportation _____
- *Other _____

TOTAL: _____

Student Signature

Parent Signature

*Other/Explanation:
