



**Student Name:**

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## **1. Household Income**

Annual household income:

- Parent/Guardian 1: \$
- Parent/Guardian 2: \$
- Other household income (if applicable): \$

Are you eligible for Free or Reduced Lunch?

- Yes  
 No
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## **2. Housing**

Do you:

- Own  
 Rent

If renting: Monthly rent: \$

If owning:

- Monthly mortgage payment: \$
  - Approximate outstanding mortgage balance (optional): \$
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## **3. Other Major Financial Obligations (optional but helpful)**

- Other real estate owned?  Yes  No  
If yes, please describe.
- Rental income received (if applicable): \$

- Do you own or lease vehicles?  Yes  No  
If yes, list make/model/year.
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#### **4. Student Income (if applicable)**

Does the student work during the school year?  Yes  No

If yes:

- Employer:
  - Approx. hours/week:
  - Hourly pay: \$
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#### **5. Special Circumstances**

Please share any financial or personal circumstances the committee should be aware of (medical expenses, recent job loss, caregiving responsibilities, etc.):