



2009–2010 STUDENT INCOME & EXPENSE DECLARATION

Student's Name _____ Student's USC ID Number _____
Last First

Student's Social Security Number _____ Student's Date of Birth _____
Month/Day/Year

Section 1: Student Income

Please list all sources of income that are used to meet living expenses. Please provide gross amounts.

Note: If you will experience a significant decrease in income due to a reduction in employment to accommodate full-time enrollment, please attach a letter of explanation (if one has not been previously submitted). Also provide the following required documentation:

- Letter from employer(s) indicating: date of termination, reduction in hours worked, reduction in salary/wages.
- Copy of most recent pay stub (including 2009 year-to-date earnings).
- Copy of last pay stub from previous employment (including 2009 year-to-date earnings).
- Statements from (if applicable): Social Security Administration, Public Assistance Agencies, State Unemployment Compensation Office, State or Private Disability Insurance Agencies.
- Copy of 2009 W-2 form(s), 1099 form(s) and/or Federal income tax return, if available.

SOURCE OF INCOME	TOTAL AMOUNT IN 2008	TOTAL ESTIMATED AMOUNT IN 2009	ESTIMATE FOR SUMMER 2009 (June 1, 2009 – August 31, 2009)	ESTIMATE FOR ACADEMIC YEAR (Sept. 1, 2009 – May 31, 2010)
<u>Wages, Salary</u>				
Student's wages/salary/tips (Attach W-2 form or pay stub)	\$ _____	\$ _____	\$ _____	\$ _____
Spouse's wages/salary/tips (Attach W-2 form or pay stub)	\$ _____	\$ _____	\$ _____	\$ _____
<u>Other Taxable Income</u>				
Interest/dividends	\$ _____	\$ _____	\$ _____	\$ _____
Social Security	\$ _____	\$ _____	\$ _____	\$ _____
Alimony/spousal support	\$ _____	\$ _____	\$ _____	\$ _____
Unemployment benefits	\$ _____	\$ _____	\$ _____	\$ _____
Severance pay/vacation pay/sick pay	\$ _____	\$ _____	\$ _____	\$ _____
<u>Untaxed Income</u>				
Workers' compensation/disability benefits	\$ _____	\$ _____	\$ _____	\$ _____
Temporary Assistance for Needy Families (TANF)	\$ _____	\$ _____	\$ _____	\$ _____
Child support received for all children	\$ _____	\$ _____	\$ _____	\$ _____
Cash support, gifts, or money paid on your behalf	\$ _____	\$ _____	\$ _____	\$ _____
Please specify source of support (name/relationship): _____				
<u>Other</u>				
Savings	\$ _____	\$ _____	\$ _____	\$ _____
Personal loans/credit card advances (Attach documentation)	\$ _____	\$ _____	\$ _____	\$ _____
Other: _____	\$ _____	\$ _____	\$ _____	\$ _____
TOTAL INCOME AND OTHER SOURCES OF SUPPORT	\$ _____	\$ _____	\$ _____	\$ _____

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Student's Name _____ Student's USC ID Number _____
Last First

Section 2: Student Expenses

Next to each item, fill in the dollar amount of your (and your spouse's, if applicable) 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. DO NOT REPORT ANY BUSINESS OR RENTAL PROPERTY 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? Please indicate name and relationship: _____

- Do you pay rent? Yes No Mortgage? Yes No

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

MONTHLY EXPENSES:

AVERAGE AMOUNT PER MONTH IN 2008

Home mortgage/rent (Do not include insurance, property tax or mortgage on rental properties)	\$ _____
Food and household supplies	\$ _____
Utilities (gas, electric, water, heating, etc.)	\$ _____
Phone, cable, internet	\$ _____
Clothing	\$ _____
Child care (Child's name and age: _____)	\$ _____
Insurance (home, car, health, life, etc.)	\$ _____
Medical/health expenses NOT covered by insurance	\$ _____
Gasoline and auto maintenance or public transportation	\$ _____
Car payments (Make: _____ Year: _____)	\$ _____
Credit card payments	\$ _____
Other: _____	\$ _____
TOTAL MONTHLY EXPENSES	\$ _____

Certification:

I/we affirm that all the information on this form is true and correct to the best of my/our knowledge. I/we understand that USC may verify all estimates of income at year end. Adjustments may be made to current or future financial aid if inaccurate estimates of income result in a financial aid overaward. Signatures are required for all persons reporting income/expenses above.

 Student's Signature

 Date

 Spouse's Signature

 Date