



Office of Financial Aid
Washington State Community College
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2017-2018 Independent Student Statement of Support

Student Name _____ Student ID No. _____ Date of Birth _____

Based upon the information you provided on your Free Application for Federal Student Aid, we need more information about how you meet your living expenses (and if applicable provide more than 50% support for your child/dependent.) Are you receiving public assistance or money from somewhere else to help pay your living expenses? Please explain in detail how you meet your financial obligations such as rent/mortgage, food, utilities, medical costs, child care, transportation, miscellaneous expenses, etc.

1.) Please describe your living expenses in 2015 and how those expenses were met.

2.) Who provides your medical insurance? If applicable, who provides your child/dependent's medical insurance?

3.) Do you have any income? If so, how much do you receive per month? ***(Please include Job and Family Services Benefits (TANF), Social Security, unemployment, child support, disability, etc.)***

Source of Income	Amount per month
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

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4.) What monthly expenses do you have and how much are you paying towards these expenses? Please itemize your living expenses, how much you pay towards your living expenses each month, and the amount and source of other assistance you receive to help with each type of living expense.

Type of Expense	Amount per month	Amount student pays	Amount & Source of other assistance
Rent/Mortgage	_____	_____	_____
Food	_____	_____	_____
Utilities (gas, electric, water, etc.)	_____	_____	_____
Transportation and Insurance	_____	_____	_____
Medical expenses and Insurance	_____	_____	_____
Clothing	_____	_____	_____
Cell Phone	_____	_____	_____
Childcare	_____	_____	_____
Other	_____	_____	_____
Other	_____	_____	_____

Student's Signature _____ Date _____