



EASTERN CONNECTICUT STATE UNIVERSITY

83 WINDHAM STREET • WILLIMANTIC, CONNECTICUT 06226 • 860-465-5000

**Financial Aid and Veterans Affairs Office**  
(Financial Aid, Student Employment, Veterans Benefits)

**2009/10 STUDENT OR PARENT BUDGET AND RESOURCE FORM**

The results of your 2009/10 Free Application for Federal Student Aid (FAFSA) reflect an income that is below the Federal Poverty Level (\$10,400). For that reason we need clarification as to whether all of your and/or your spouse's (independent students) or your parent's (dependent students) financial resources were included on the FAFSA. Please complete this form by providing all information. Return it to the office within (10) business days so that we can continue processing your request for financial aid. The data provided on this form will be utilized to determine your aid eligibility.

If you have any questions regarding this form, please contact the office at [financialaid@easternct.edu](mailto:financialaid@easternct.edu) or by calling (860) 465-5205. A member of the client services staff will assist you.

Student: \_\_\_\_\_

Eastern ID Number: \_\_\_\_\_

E-mail address: \_\_\_\_\_

Cell phone number (student): \_\_\_\_\_

Cell phone number (parent, if dependent): \_\_\_\_\_

**Please check all that apply. If none of the following apply, write "n/a" beside each line.**

- I (We) lived with family/friends in 2008 and they provided support. The value of the support provided in 2008 was \$\_\_\_\_\_.
- I (We) received Temporary Aid to Needy Families or other Public Assistance in 2008. The total amount received excluding food stamps and rent subsidy was \$\_\_\_\_\_.
- I (We) received Social Security Benefits in 2008. The total amount received was \$\_\_\_\_\_. (Attach copies of all Social Security 1099 forms)
- I (We) received other income in 2008. The amount of income received was \$\_\_\_\_\_. The source of the income was \_\_\_\_\_.
- I (We) received WIC and/or Food Stamps in 2008. The amount received in 2008 was \$\_\_\_\_\_.



**2009/2010 STUDENT OR PARENT BUDGET AND RESOURCE FORM**  
**(continued)**

2008 MONTHLY EXPENSES

Please list your and/or your spouse's (independent students) or your parent's (dependent students) estimated monthly expenses for 2008. If you did not have an expense for a given line, please write "0".

Rent/Mortgage           \$ \_\_\_\_\_  
Heat                       \$ \_\_\_\_\_  
Electricity               \$ \_\_\_\_\_  
Telephone               \$ \_\_\_\_\_  
Cable/Direct TV         \$ \_\_\_\_\_  
Health Insurance       \$ \_\_\_\_\_  
Auto Insurance         \$ \_\_\_\_\_  
Auto Fuel/Gas          \$ \_\_\_\_\_  
Clothing                 \$ \_\_\_\_\_  
Credit Cards            \$ \_\_\_\_\_  
Miscellaneous          \$ \_\_\_\_\_  
Food                      \$ \_\_\_\_\_  
(excluding amount purchased with food stamps or WIC)

Provide any additional relevant information below:

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**My signature below certifies that the information reported on this form is true, correct, and complete to the best of my knowledge.**

\_\_\_\_\_  
**Student Signature and ECSU ID Number**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Parent Signature (for dependent students)**

\_\_\_\_\_  
**Date**