



FINANCIAL AID

The financial aid committee cannot process incomplete applications. The following documents **MUST** be submitted:

- Recent Tax Return
- 1 Month's Pay Stubs
- Alternate Form of Income (If Applicable)
- Invoices/Monthly Bills (2)

Parents/Guardians names

Student name(s)

1. _____

1. _____

2. _____

2. _____

In Household: _____ # Adults: _____ # Children: _____ Other Dependents: _____

MONTHLY INCOME INFORMATION

Principal Wage Earner (before deductions) Monthly: \$ _____

Occupation: _____ Employer: _____

Other Wage Earners (before deductions) Monthly: \$ _____

Occupation: _____ Employer: _____

OTHER MONTHLY INCOME

Government Assistance: \$ _____

Retirement/Social Security: \$ _____

Other Monthly Income (ALIMONY, RENTAL, INVESTMENT, ETC.): \$ _____

MONTHLY EXPENSES

Mortgage (including real estate taxes): \$ _____

Rent + Utilities: \$ _____

Auto loan payment: \$ _____

Education loan payment: \$ _____

Medical expenses : \$ _____

How much do you feel you can reasonably afford to pay toward your CMCB tuition?

\$ _____ per month. (Please see Registration Information Sheet for tuition costs).

Signature _____ Date _____

Are there any other financial considerations you would like us to know about?

Please describe: _____