

## Submit Documents Via Secure Electronic Submission: fordham.edu/faupload

or **Fax:** (718) 817-3921

## 2026-2027 Expense/Resource Form

Last name rification is needed to ensure you are being considered for		First name  he maximum amount of financial ai	d available The 2024 income
orted on your financial aid appenses. When completed, this vendent student, you must inclust equal or exceed Total 2024 iness you own. Documentation	dication appears to be low. P worksheet should demonstrate ade parental information on the Personal Expenses (A) rec in may be requested to suppor	lease fill out the worksheet below, lee how you supported yourself and/or lee second page. <b>In all cases, the Toorded.</b> Do not include any income to the figures reported on this form.	isting all of your income and r your family in 2024. If you ar stal 2024 Personal Income (B) or expenses that are paid for by
Expenses	CNTS 2024 ANNUAL PE. Student & Spouse	RSONAL EXPENSES AND IN Income	Student & Spouse
Rent	Student & Spouse	Earnings from all employment	Student & Spouse
Kent	\$	after taxes (Taxable & Untaxable)	\$
Mortgage & Real Estate Taxes	·	Unemployment Compensation	
moregage to Item Estate Tames	\$		\$
Food	\$	Withdrawals from savings	\$
Car payment/Insurance		Social Security/Disability Benefits	
Car maintenance/Gas	\$	Welfare, AFDC, TANF, SNAP	\$
Cai maintenance/Gas	\$	Wellale, AIDC, IANI, SNAI	\$
Utilities/Telephone/Cable	\$	Child Support Received	\$
Child Support/Alimony Paid		Alimony/Palimony Received	
List child(ren) and age below	\$		\$
Clothing	\$	Expenses billed to you & paid by others (total dollar value)	\$
Entertainment	Ψ	Cash received from family and/or	Ψ
Entertainment	\$	friends	\$
Child Care	Ψ	Financial Aid refunds received	Ψ
	\$	in 2023	\$
Unreimbursed Medical	7	*Support provided by others	7
	\$	(Please explain below)	\$
Credit Card Payments (exclude		Tribal Benefits received in 2024	
amounts paid for in other		(total dollar value)	
expense categories)	\$	·	\$
Other: Explain below	\$	Other: Explain below	\$
Other: Explain below	\$	Other: Explain below	\$
(A) Total 2024 Expenses	\$	(B) Total 2024 Income	\$
*Examples of support include	food, shelter, clothing, non-cash gift	s etc. Be sure to list the total dollar value of s	support received in 2024.

Dependent students must complete the next page of this form.

FIDN#:	Δ		
111711#.	$\overline{}$		

Rent  Mortgage & Real Estate Taxes  Food  Car payment/Insurance  Car maintenance/Gas  Utilities/Telephone/Cable  Child Support/Alimony Paid List child(ren) and age below  Clothing  Entertainment  Child Care  \$ Unreimbursed Medical  Credit Card Payments (exclude amounts paid for in	Earnings from all employment after taxes (Taxable & Untaxable) Unemployment Compensation Withdrawals from savings Social Security/Disability Benefits Welfare, AFDC, TANF, SNAP Child Support Received Alimony/Palimony Received Expenses billed to you & paid by others (total dollar value) Cash received from family and/or friends Financial Aid refunds received in 2023	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$
Mortgage & Real Estate Taxes  Food  Car payment/Insurance  Car maintenance/Gas  Utilities/Telephone/Cable  Child Support/Alimony Paid List child(ren) and age below  Clothing  Entertainment  Child Care  \$ Unreimbursed Medical  Credit Card Payments	Unemployment Compensation Withdrawals from savings Social Security/Disability Benefits Welfare, AFDC, TANF, SNAP Child Support Received Alimony/Palimony Received Expenses billed to you & paid by others (total dollar value) Cash received from family and/or friends Financial Aid refunds received	\$ \$ \$ \$ \$
Food  Car payment/Insurance  Car maintenance/Gas  Utilities/Telephone/Cable  Child Support/Alimony Paid List child(ren) and age below  Clothing  Entertainment  Child Care  S  Unreimbursed Medical  Credit Card Payments	Withdrawals from savings  Social Security/Disability Benefits  Welfare, AFDC, TANF, SNAP  Child Support Received  Alimony/Palimony Received  Expenses billed to you & paid by others (total dollar value)  Cash received from family and/or friends  Financial Aid refunds received	\$ \$ \$ \$
Car payment/Insurance  Car maintenance/Gas  Stillities/Telephone/Cable  Child Support/Alimony Paid List child(ren) and age below Clothing  Entertainment  Child Care  Support/Alimony Paid Support/Ali	Social Security/Disability Benefits Welfare, AFDC, TANF, SNAP Child Support Received Alimony/Palimony Received Expenses billed to you & paid by others (total dollar value) Cash received from family and/or friends Financial Aid refunds received	\$ \$ \$ \$
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Child Support/Alimony Paid List child(ren) and age below Stothing Stotertainment	Expenses billed to you & paid by others (total dollar value)  Cash received from family and/or friends  Financial Aid refunds received	\$
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\$ Child Care  Surreimbursed Medical  Credit Card Payments	others (total dollar value)  Cash received from family and/or friends  Financial Aid refunds received	
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Child Care \$ Unreimbursed Medical \$ Credit Card Payments	Financial Aid refunds received	***************************************
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Inreimbursed Medical \$ Iredit Card Payments	in 2023	l A
redit Card Payments		\$
Credit Card Payments	*Support provided by others	ф.
	(Please explain below)	\$
	Tribal Benefits received in 2024	
	(total dollar value)	ф
ther expense categories) \$	OI F I I I	\$
ther: Explain below \$	Other: Explain below	\$
Other: Explain below	Other: Explain below	Ψ
s s	Chief. Explain below	\$
C) Total 2024 Expenses \$  *Examples of support include food, shelter, clothing, non-cash gifts e	(D) Total 2024 Income	\$

I (wa) contify the information warm	ted above is true and accurate to the best o	Fmy (ann) knowledge I (we) understan	d that providing
misleading or false information c information is requested, I (we) ag	can jeopardize financial aid eligibility an ree to provide the institution with any sup signatures. Note: If you are a dependent st	d subject me (us) to federal penaltic porting documentation to verify the in	es. If additional formation stated
Student's Name (Print)	Student's Signature	Date	
Spouse's Name (Print)	Spouse's Signature	Date	
Parent's Name (Print)	Parent's Signature	Date	