



2011-2012 Means of Support Form

Student's Name (print)

Student ID

You have reported minimal **2010** income on your application for financial aid. Before we can complete the review of your application for financial assistance, we need to know how you supported yourself in **2010**.

Please describe in detail where the money comes from to pay each Expense Category below.

(i.e., SSI, disability, food stamps, work, parent paid, friend paid, relative paid...)

Students and parents (of dependent students) are required to complete this form. If a particular section does not apply to you please put a "0" or "N/A" in the appropriate space.

This form will be considered INCOMPLETE if you leave any spaces/columns BLANK.

EXPENSE CATEGORY	Student's Monthly Costs	Where did the money come from to pay this expense? <small>(i.e., SSI, disability, food stamps, work, parent paid, friend paid, relative paid...)</small>	Parent's Monthly Costs (dependent students only)	Where did the money come from to pay this expense? <small>(i.e., SSI, disability, food stamps, work, parent paid, friend paid, relative paid...)</small>
Housing/Rent	\$		\$	
Electricity	\$		\$	
Heat	\$		\$	
Telephone	\$		\$	
Food	\$		\$	
Auto/Transportation	\$		\$	
Clothing	\$		\$	
TOTALS	\$		\$	

****Please attach additional sheets if needed**

Student's Signature

Date

Parent's Signature (dependent students only)

Date

Please return this form to: WMCC – Financial Aid Office
2020 Riverside Drive
Berlin, NH 03570