Community College of Vermont
Supplemental Budget Form

Name: ____________________________________   ID# ___________________    Semester __________

For budgeting and calculating your loan payment amount, please visit the following web sites:

Student Loan Calculator http://www.mapping-your-future.org/features/loancalc.htm
Budget Calculator http://www.mapping-your-future.org/features/budgetcalc.htm

Complete the following budget listing the income and expenses you expect you will have for the months you have been/will be enrolled. If you share your housing, please list only your share of the income and expenses. Explain any unusual expenses you have, and attach it to this form. Please take the time to be as accurate as you can and list your total income, expenses for tuition, fees, and books, and your other expenses on a monthly basis. Please feel free to add additional details on the back of this form.

Monthly Student Income: _____________ x 4 months = _________________ Student’s semester income (semester)

Other Funding Sources (per semester):

Grants:
Pell ________________
SEOG ________________
VSAC ________________

Vouchers/ Waivers ________________
Other Assistance______________

Total Other Funding: ______________ + Student Income _____________ = ___________ Total Assets

Expenses:
Education Costs not covered by other financial aid (total):
Tuition/ Fees: ________________
Books/Supplies_________________

Student Portion of Housing Expenses (monthly):
Rent ________________
Heat ________________
Electricity ________________
Phone ________________
Water ________________
Food ________________

Transportation Expenses (monthly):
Car payment ________________
Gas ________________
Maintenance ________________
Insurance ________________
Miscellaneous Expenses (monthly):
Medical _____________________
Entertainment _____________________
Other _____________________ (please list and attach to this form)

**Total Student Portion of Monthly Expenses**: __________ x 4 = ___________

Semester Expenses

Total Semester Expenses _________ - Total Funding and Income _________ = ___________

Potential Need/ Loan Request

I certify that the information contained on this form is true and accurate to the best of my knowledge.

*Signature*: ____________________________________________  *Date*: ____________