

2022-2023 Monthly Resource and Expenditure Form

Eastern WV CTC

316 Eastern Drive Moorefield, WV 26836

Phone: 304-434-8000 FAX: 304-434-7004

FINAID@easternwv.edu

Stı	udent's Name: Student ID #:	
(F <i>i</i>	You reported an unusually low amount of household income on your Free Application for Federal Student Aid (FAFSA). In order to document how the household was maintained on this amount of income, please complete this form as accurately as possible for the household in which you currently reside. Do not leave any fields blank. Expenditures:	
1.	What was the monthly cost of housing (rent, mortgage)?	
	From what income source was this paid?	
	If your household did not have this expense, explain why	
	Independent Students: Is your name on the lease or mortgage? ☐ Yes ☐ No	
2.	What was the monthly cost of utilities (electric, gas, water, phone, cable)?	
	From what income source was this paid?	
	If your household did not have this expense, explain why	
	Independent Students: Are the utilities in your name? ☐ Yes ☐ No	
3.	What was the monthly cost of food?	
	From what income source was this paid?	
	If your household did not have this expense, explain why	
4.	What was the monthly cost of car payments/insurance and transportation costs?	
	From what income source was this paid?	
	If your household did not have this expense, explain why	
5.	What was the monthly cost of clothing, personal needs, and misc.?	
	From what income source was this paid?	
6.	What was the monthly cost of medical expenses and/or health insurance?	
	From what income source was this paid?	

Eastern WV Community and Technical College

Date

Parent Signature (if dependent)

316 Eastern Drive, Moorefield, WV 26836 Telephone: 304-434-8000 Toll Free: 877-982-2322

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