

Cook County Higher Education Scholarship Application Financial Statement

This financial disclosure should reflect your personal and household MONTHLY income and expenses during the period of time you will be using the grant. Please use this as a **TOOL to complete the Total Monthly Income and Expenses questions on the scholarship application**. If you need help completing this or have questions, please contact us. Again, this is a tool and please do not return to Cook County Higher Education.

Household INCOME (Monthly GROSS income)		Monthly Amount
Your Job Income	Yes / No	\$ _____
Applicant spouse/significant other Job Income	Yes / No	\$ _____
Other Job Income in household	Yes / No	\$ _____
Applicant or spouse receive child support?	Yes / No	\$ _____
Applicant receive alimony?	Yes / No	\$ _____
Applicant receive public assistance (such as food stamps)?	Yes / No	\$ _____
Other sources of household income? Examples include, but may not be limited to: Social Security, Survivor benefits, Workers' Compensation, or Unemployment Benefits.	Yes / No	\$ _____
TOTAL Monthly Household Income	Please transfer to application	\$ _____

Household Expenses (Monthly)		Monthly Amount
Rent or Mortgage Payment	Yes / No	\$ _____
Automobile Payment	Yes / No	\$ _____
Gasoline	Yes / No	\$ _____
Auto Insurance	Yes / No	\$ _____
Other Insurance (renters, life, home)	Yes / No	\$ _____
Credit Card(s) Payment	Yes / No	\$ _____
Child Support	Yes / No	\$ _____
Spousal Support	Yes / No	\$ _____
Payment on Past Educational Loans	Yes / No	\$ _____
Childcare	Yes / No	\$ _____
Clothing	Yes / No	\$ _____
Utilities: PUC, Arrowhead, Propane	Yes / No	\$ _____
Satellite/TV	Yes / No	\$ _____
Cell phone	Yes / No	\$ _____
Property taxes	Yes / No	\$ _____
Special Needs	Yes / No	\$ _____
Healthcare/ Health Insurance	Yes / No	\$ _____
Other Activities	Yes / No	\$ _____
Charitable Donations	Yes / No	\$ _____
TOTAL Monthly Household Expense	Please transfer to application	\$ _____