TULANE UNIVERSITY

*Financial Aid* **2026-27 Monthly Living and Personal Expenses for Parents of Dependent Students**

*Submit this worksheet to:* **To expedite the processing of this form, we ask that you submit the form as an email attachment to the Tulane University Financial Aid Office email fadocs@tulane.edu using the subject 2026-27 Monthly Living and Personal Expenses.**

**Student's Name** _____ **Student's Tulane ID #**_____

Final 4 digits of student's SSN _____

PARENTS: Next to each item, fill in the U.S. dollar amount of your family's average monthly living expenses and sources of income. If an expense occurs other than monthly, please convert it to a monthly average. Do not report any business or rental property expenses or income used to meet those expenses on this page. Fill in all items. If an item does not apply, indicate this by writing "N/A". If income does not meet expenses, please explain on the back of this form.

| **Living Expenses** | **Average Monthly Amount (2024)** | **Average Monthly Amount (2025)** |
|---|---|---|
| Home Mortgage | $ | $ |
| Home Property Tax | $ | $ |
| Home Rent | $ | $ |
| Utilities (gas, electric, phone, water) | $ | $ |
| Insurance (home, car, health, life, etc.) | $ | $ |
| Food and Household Supplies | $ | $ |
| Car Payments (Model/Year _____) | $ | $ |
| Gas | $ | $ |
| Public Transportation | $ | $ |
| Credit Card Payments | $ | $ |
| Dependent Care | $ | $ |
| Other (please specify: _____) | $ | $ |
| Other (please specify: _____) | $ | $ |
| **Total Monthly Payments** | $ | $ |

| **Sources of Income and Gifts** | **Average Monthly Amount (2024)** | **Average Monthly Amount (2025)** |
|---|---|---|
| Mother's Wages/Salary | $ | $ |
| Father's Wages/ Salary | $ | $ |
| Business Income | $ | $ |
| Rental Property Income | $ | $ |
| Interest/ Dividend Income | $ | $ |
| Capital Gains Income | $ | $ |
| Gifts from Family Members or Others | $ | $ |
| Unemployment Benefits | $ | $ |
| Disability Benefits | $ | $ |
| Social Security Benefits | $ | $ |
| Savings | $ | $ |
| Personal Loans (attach documentation) | $ | $ |
| Credit Card Advances (attach documentation) | $ | $ |
| Other (please specify: _____) | $ | $ |
| **Total Monthly Income** | $ | $ |

I (we) declare that the information reported on this form and any attachments hereto is true, complete and accurate, to the best of my (our) knowledge.

Parent #1's Signature _____ Date _____

Parent #2's Signature _____ Date _____ ver.12/3/25