

Only fill out the rows applicable to you. Please use the 'Notes' space to expand on any 'Other' rows.

FUNDING		MONTHLY INCOME	
Scholarships & Bursaries	\$	Income/Wages	\$
Student Loans	\$	Family Allowance / Other	\$
Other	\$	Subtotal	\$
Total Funding (A)	\$	Multiply by the # of months in the program	\$

MONTHLY LIVING COSTS

Rent or Mortgage	\$
Food, Transportation & Basic Living Necessities	\$
Utilities	\$
Loan Payments	\$
Medical/Dental	\$
Miscellaneous & Other	\$
Subtotal	\$
Multiply by # of months in the program	\$
Total Living Costs (C)	\$

Total Income (B)	\$
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PROGRAM COSTS

Tuition Fees	\$
Books & Supplies	\$
Other	\$
Total Program Costs (D)	\$

TOTALS

Funding (A) + Income (B)	E \$
Living Costs (C) + Program Costs (D)	F \$
Total Need (E - F)	\$

ADDITIONAL NOTES

Please use this space for additional budget notes.

APPLICANT DECLARATION

I hereby confirm that the information provided in this document is accurate, correct and complete to the best of my ability. (Please check box)