

EMPOWERED MINDS FOUNDATION

BUDGET FORM

Name:

Family status: Single, no kids Married/common law, no kids Other (Please explain): _____
 Single, with kids Married/common law, with kids _____

If applicable, how many children do you care for and how often are they in your care? _____ Full-time Part-time

Please complete this form to the best of your ability. It is based on an 8-month study period (September - April) but will still be used to calculate need for students in 6-7 month programs. If you need to explain anything in more detail, please attach a separate sheet.

School resources

How much have you received or will you be receiving this year for your school program?

Student loans (including grants): Other scholarships & bursaries: Savings (current): Other:

If applicable, please explain 'other' school resources (i.e., family contributions, company sponsorships, etc.): _____

TOTAL SCHOOL RESOURCES:

Monthly income

*If payments are annual or irregular, please just estimate how much per month this works out to be (i.e., a \$1200 one-time payment = \$100/month)

Working income (after taxes): Childcare subsidy: Child / spousal support: Canada Child Benefit:

Spouse's working income (after taxes): Other: Other: Other:

If applicable, please explain 'other' income (i.e., CPP, GST rebate, etc.): _____

TOTAL MONTHLY INCOME: x 8 MONTHS = + **TOTAL SCHOOL RESOURCES** = **TOTAL RESOURCES**

School expenses

How much will your program cost you? (If longer than 1 year, provide costs for one academic year)

Tuition & fees: Books & Supplies: Residence fees (if applicable): Other:

If applicable, please explain 'other' school expenses (i.e., travel & accommodation for practicum, etc.): _____

TOTAL SCHOOL EXPENSES:

Monthly expenses

*For annual costs (i.e., property tax), divide by 12 and multiply by 8 months

Rent / mortgage: Food: Utilities (heat, gas, water, electricity): TV / Internet / Phone:

Car (finance/lease, gas & insurance): Home / renter's insurance: Personal items & clothing: Laundry:

Medical expenses (not covered by insurance): Leisure: Other:

If applicable, please explain 'other' expenses: _____

TOTAL MONTHLY EXPENSES: x 8 MONTHS = + **TOTAL SCHOOL EXPENSES** = **TOTAL EXPENSES**

FINANCIAL NEED

	-		=	
TOTAL EXPENSES		TOTAL RESOURCES		FINANCIAL NEED

DEBT (Optional)

Credit card debt: Line of credit debt: Prior student loan debt:

Other debt: Please explain 'other' debt: _____