**Budget Planning Worksheet**

This budget is for months (budgets are generally for 9 or 12 months)

**ESTIMATED EXPENSES**

**MONTHLY AMOUNT**

**YEARLY AMOUNT**

**ESTIMATED**

**RESOURCES & INCOME**

**MONTHLY AMOUNT**

**YEARLY AMOUNT**

**EDUCATION**

**FAMILY CONTRIBUTION**

TUITION

YOUR PARENTS

BOOKS

YOU

FEES

FRIENDS/RELATIVES

SUPPLIES

**FINANCIAL ASSISTANCE**

**HOUSING**

SUMMER JOB SAVINGS

DORMITORY/RENT

OTHER SAVINGS

UTILITIES

TELEPHONE

**NON-TAXABLE INCOME**

AFDC

**FOOD**

VETERANS BENEFITS

BOARD PLAN

SOCIAL SECURITY

PERSONAL

OTHER

**TRANSPORTATION**

**FINANCIAL AID GRANTS**

BUS/TRAIN/AIR

FEDERAL PELL GRANT

COMMUTING

FSEOG

CAR REPAIR/INSURANCE

STATE GRANT

INSTITUTIONAL GRANT

**HEALTH**

**FEDERAL DIRECT LOANS**

INSURANCE

SUBSIDIZED STAFFORD/FORD

DOCTORS

UNSUBSIDIZED STAFFORD/FORD

PRESCRIPTIONS

**LOANS**

**PERSONAL/MISCELLANEOUS**

FEDERAL PERKINS

LAUNDRY/CLEANING

INSTITUTIONAL

DRUG STORE ITEMS

STATE

OTHER

**ENTERTAINMENT**

**SCHOLARSHIPS**

MOVIES/CONCERTS

INSTITUTIONAL

OTHER

PRIVATE

**IN-SCHOOL INTEREST PAYMENTS**

**EMPLOYMENT**

DIRECT UNSUBSIDIZED LOAN

FEDERAL WORK-STUDY

INSTITUTIONAL

**DEPENDENT CARE**

CO-OP EDUCATION

**EMERGENCIES**

OFF-CAMPUS

**OTHER**

**OTHER INCOME/RESOURCES**

**TOTAL EXPENSES**

**TOTAL RESOURCES**

**(YOUR TOTAL RESOURCES MINUS YOUR TOTAL EXPENSES) =YOUR BALANCE**