



PARENT DOCUMENTATION OF LIVING RESOURCES

STUDENT INFORMATION

AID YEAR: 24/25

LLU ID# or Social Security Number: \_\_\_\_\_

Student Name: Last \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_

PARENT DOCUMENTATION OF LIVING RESOURCES

Due to the minimal amount of income reported on your 2024-2025 FAFSA application, additional clarification of your situation is being requested. Please complete the following parental information below by providing expense and resource information for calendar year 2022. You may be asked to provide additional documentation to support your answers.

MONTHLY INCOME

- 1. Father's Earnings \$ \_\_\_\_\_
2. Mother's Earnings \$ \_\_\_\_\_
3. Child Support Received \$ \_\_\_\_\_
4. Unemployment/Workers Comp. \$ \_\_\_\_\_
5. Welfare Benefits/TANF \$ \_\_\_\_\_
6. Social Security \$ \_\_\_\_\_
7. Other Sources (financial aid, family or public assistance, etc.) \_\_\_\_\_
Total Monthly Income \$ \_\_\_\_\_

MONTHLY EXPENSES

Monthly Food/Rent/Utilities

- 1. Food \$ \_\_\_\_\_
2. Mortgage/Rent \$ \_\_\_\_\_
3. Utilities
Phone (including cell) \$ \_\_\_\_\_
Gas \$ \_\_\_\_\_
Electricity \$ \_\_\_\_\_
Water/Sewage/Garbage \$ \_\_\_\_\_

Monthly Transportation Costs

- 1. Car Payment \$ \_\_\_\_\_
2. Gas \$ \_\_\_\_\_
3. Oil/Tune-up \$ \_\_\_\_\_
4. Car Insurance \$ \_\_\_\_\_
5. Repairs (non-cosmetic) \$ \_\_\_\_\_
6. License/Registration \$ \_\_\_\_\_

Monthly Personal Costs

(clothing/uniforms, grooming/sundries, etc...) \$ \_\_\_\_\_

Miscellaneous Costs

- 1. Unreimbursed Medical Exp. \$ \_\_\_\_\_
2. Child Care \$ \_\_\_\_\_
3. Credit Cards \$ \_\_\_\_\_
4. Donations \$ \_\_\_\_\_
5. Other (list) \_\_\_\_\_
Total Monthly Expenses \$ \_\_\_\_\_

ADDITIONAL EXPENSE INFORMATION

On this form, you have provided detailed information about your monthly expenses. If your monthly expenses were greater than your monthly income, please indicate how you were able to meet your monthly expenses.

REQUIRED SIGNATURE

I certify that all information reported on this form is complete and correct.

Parent's Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Mail form to: LLU Office of Financial Aid, 11139 Anderson St., Loma Linda, CA 92350, or Fax to: (909)558-4283

If you have any questions please email Finaid@llu.edu or call (909) 558-4509