



MULTNOMAH UNIVERSITY

2020-2021 Proof of Support Worksheet

RETURN THIS FORM TO: Multnomah University Financial Aid Office | 8435 NE Glisan Street | Portland, OR 97220 Phone: 503.251.5335 | Fax: 503.445.5199 | Email: finaid@multnomah.edu

I. Personal Information

Name: _____ Student ID: _____
Last First MI

Address: _____
Mailing Address City State Zip Code

During 2018, I was enrolled in college: Full-time Part-time

Did you use a portion of your loans for living expenses during 2018? Yes No

II. Income Information

If you indicated that your total income and benefits for the calendar year 2018 were less than the amounts listed below, please complete Section III.

Single – Did not file taxes (Independent)	\$10,400
Married and/or with dependents (Independent) – Did not file taxes	\$20,800
Single (Dependent) and parent(s) fall into categories above	Both student & parent must complete this form

III. Expenses Information

Please estimate the amount spent on the following categories of basic expenses. If you did not pay for these expenses, estimate the value of this benefit per month received and multiply this amount by the number of months you received it.

Food Expenses:

Amount: \$ _____ x _____ = \$ _____

Does this include Food Stamps?

Housing (Rent/Utilities):

Amount: \$ _____ x _____ = \$ _____

Does this include Subsidized Housing?

Transportation (Gas/Bus Fare):

Amount: \$ _____ x _____ = \$ _____

Miscellaneous (Toiletries/Basic Upkeep):

Amount: \$ _____ x _____ = \$ _____

IV. Explanation of resources for the expenses listed above

V. Certification of Application

I certify that the information in this application is true and complete to the best of my knowledge.

Student's Signature

Date

Parent's Signature

Date