
 STUDENT NAME

 UMASS GLOBAL ID NUMBER

The 2021-2022 FAFSA requires 2019 income to be reported. Please provide information regarding your household expenses for 2019 and how you met those expenses. If you are dependent, please have your parents provide the information.

FAMILY EXPENSES	2019 ANNUAL AMOUNT
Housing (rent or mortgage payment)	
Food	
Transportation (car payments, gas, maintenance)	
Utilities (mobile phone, gas, phone, electric)	
Insurance (Home/Renters, Auto)	
Clothing	
Medical and dental	
Child Care	

Please explain how the above expenses were met. If someone paid these expenses on your (or your parent's if dependent) behalf or provided you with assistance such as housing, please explain below:

CERTIFICATION: All of the information on this form is true and complete to the best of my knowledge. If asked by the Financial Aid Office, I agree to provide documentation of the information that I have given on this form. I also realize that purposely giving false or misleading information on this form may result in reduced eligibility and/or repayment of aid.

 STUDENT SIGNATURE

 DATE

 PARENT SIGNATURE IF DEPENDENT

 DATE

Submit Completed Form via the Student Portal
OR Fax: 866-659-1147 **Mail:** UMass Global, Financial Aid Office, Third Floor 16355 Laguna Canyon Rd, Irvine, CA 92618