



Marymount of Santa Barbara

Family Monthly Budget

It is important for Marymount to have a clear picture of your monthly expenses, along with the financial statement you submitted to the School and Student Service for Financial Aid. Please complete the following monthly budget and return it to Marymount along with your tax returns and other requested information. Thank you!

Student Name: _____

Income		
Father Salary/Net Wages	(after taxes)	_____
Mother Salary/Net Wages	(after taxes)	_____
Business/Professional		_____
Dividends/Interest		_____
Rentals (gross)		_____
Spousal Support		_____
Child Support		_____
Disability		_____
Unemployment		_____
Social Security		_____
Other: _____		_____
Total Current Net		_____
Monthly Income (after taxes)		\$ _____

Expenses		
Mortgage(s)		_____
Property Taxes		_____
Home Insurance		_____
Home Repairs & Maintenance		_____
Household Supplies		_____
Utilities		_____
Telephone		_____
Rent		_____
Renter's Insurance		_____
Car Payment		_____
Make _____ Year _____		_____
Car Insurance		_____
Car Maintenance & Repair		_____
Medical/Dental Insurance		_____
Medical/Dental Expenses		_____
Life Insurance		_____
Groceries		_____
Eating Out		_____
Entertainment		_____
Clothing		_____
Vacations		_____
Tuition (current)		_____
Child Care & Activities		_____
Incidentals		_____
Credit Card Payments		_____
Other: _____		_____
Other: _____		_____
Total Current		_____
Monthly Expenses		\$ _____

<i>Resources available for the student during the school year to cover school costs (per month):</i>	
From parents(s) income/assets	_____
From relatives and friends	_____
From student assets	_____
From other resources	_____
Total Per Month	\$ _____
Multiply by 12 for Total Per Year	\$ _____