



# FINANCIAL SUPPORT FORM

**Do I need this form?** If you are applying to Capital IDEA but cannot provide your own financial information because you are supported by someone else (like a parent, but not a spouse), then yes, you will need to get this form filled out. If you (and/or your spouse) support your household, you do not need to fill out this form. You will fill out the Income and Expense Worksheets.

**Who fills out this form?** This form is to be filled out by the person providing the financial support.

**Applicant's name (first and last):** \_\_\_\_\_

**Financial support provided by (full name):** \_\_\_\_\_

**Relationship to applicant:** \_\_\_\_\_

*Ex.: mother, father, aunt, etc.*

**He/she resides with me at this address:** \_\_\_\_\_

\_\_\_\_\_  
*street, unit/apt., city, state, and zip code*

**Financial support provided for applicant:**

Fill in the amounts below that account for how much you spend each month to directly support the applicant. Ex. Include their portion of the food bill and their portion of the cell phone bill, but only include car insurance if the applicant is a covered driver on the policy.

Expenses that support the applicant	Estimated monthly cost for applicant
RENT / MORTGAGE	\$
UTILITIES <i>(electricity, water, gas, cable internet)</i>	\$
CAR <i>(monthly payment, insurance, gas)</i>	\$
CELL PHONE	\$
FOOD	\$
CLOTHING	\$
<b>ESTIMATED TOTAL</b>	\$

**Please sign your name to indicate the information is correct and complete. Include your contact information, and date below.**

\_\_\_\_\_  
*Signature of individual providing support*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*E-mail Address*

\_\_\_\_\_  
*Phone Number*