



**2023-2024**

**Homeless/Dependency Renewal Form**

**Please use BLACK ink ONLY**

**Student Name:** \_\_\_\_\_ **Student ID Number: A** \_\_\_\_\_

**A. Student (and spouse if applicable) Information: (MUST PROVIDE PROOF OF ANY STATE AND/OR FEDERAL ASSISTANCE)**

Use this chart to document how you pay your basic living expenses.

2021 Expenses	Annual Amount	How is this expense paid? Example: pay check, loans, Pell grant, child support, social security/SSI, etc.
Rent or Mortgage	\$	
Utilities	\$	
Groceries/ Household Supplies	\$	
Car Payment/Gas	\$	
Insurance	\$	
Child Care/ Day Care	\$	
Diapers and Baby Food	\$	
Personal- clothing, cell phone, entertainment, etc.	\$	

**Source(s) of Untaxed Income Received:** \_\_\_\_\_ **Amount \$** \_\_\_\_\_

**Student Signature** \_\_\_\_\_ **Date:** \_\_\_\_\_

**B. LIVING SITUATION:**

- During the holidays and summer months (**when school is not in session**), what are your living arrangements?  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
- During holidays and summer months (**when school is not in session**), what is your mailing address and whose residence is this?  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**C. ADDITIONAL INFORMATION:**

What other Social Services agency provide you support (i.e., DHS, SNAP, Housing Authority, etc.)? **Must provide proof of assistance.** \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_