

INCOME & EXPENSES SUMMARY

The following information is requested to determine your eligibility for hardship/unemployment deferment, forbearance, or a revision of your repayment schedule. The information you provide will remain confidential, however, we reserve the right to use this information if collection efforts become necessary. We also reserve the right to use a credit report to verify the information you provide.

Name: _____
 Address: _____
 Telephone: _____ (home)
 _____ (work)
 _____ (cell)

Account Number(s): _____
 Date of Birth: _____
 Social Security Number: _____

1. Marital Status:

- Single
- Married
- Widow(er)
- Separated/Divorced

2. Number of Dependents: _____

Relationship: _____ Age: _____

3. Monthly Income from ALL Sources*:

Gross Monthly Salary/Wages \$ _____
 Child Support \$ _____
 Alimony/Support \$ _____
 Unemployment \$ _____
 Public Assistance \$ _____
 Social Security/Veteran \$ _____
 Stocks, Bonds & Investments \$ _____
 Other: _____ \$ _____
Total Monthly Income: \$ _____

4. Checking Account Balance: \$ _____

5. Savings Account Balance: \$ _____

6. Monthly Expenses:

Rent/Mortgage: \$ _____
 Utilities: \$ _____
 Child Care: \$ _____
 Car Payments: \$ _____
 Other Vehicle(s) \$ _____
 Public Transportation: \$ _____
 Insurance: \$ _____
 Telephone: \$ _____
 Cellular Phone/Pager: \$ _____
 Food: \$ _____
 Credit Card(s) \$ _____
 Other Charge Accounts: \$ _____
 Medical: \$ _____
 Cable/Satellite TV: \$ _____
 Entertainment: \$ _____
 Clothing: \$ _____
 Dry Cleaning: \$ _____
 Cleaning/Yard Service: \$ _____
 Other: _____ \$ _____
 _____ \$ _____
 _____ \$ _____
 _____ \$ _____
Total Monthly Expenses: \$ _____

*Attach documentation to substantiate all income AND expense entries.