

Parent Signature (if applicable)

Undergraduate Students Estimated Monthly Expense Form

This form is to be completed by a student enrolled as an **Undergraduate** at SMU. If you are enrolled in a Graduate or Professional program, you must complete the Graduate Monthly Expense form which can be downloaded through the forms library on the SMU Financial Aid webpage.

Student Name Student Email		Student ID Number	
		Student Telephone Number	
·		pporting documentation to your Financial Aid Adviso	
		h of the following. Items listed without supporti	
		l documentation must be in student's name or provi	
tatement of paid receip	ot by student.		
Expense	Amount per Month	Required Documentation	
Monthly Rent	\$	Rental Agreement/ Lease	
Utilities – Gas	\$	Copy of gas bill	
Electric	\$	Copy of utility bill	
Water	\$	Copy of water bill	
Phone	\$	Copy of telephone bill	
Cable/Internet	\$	Copy of cable/internet bill	
Food/Personal Items	\$	Provide estimated food expense for one month only	
Cell Phone	\$	Copy of cell phone bill	
Car Payment	\$	Include ONLY if the car is registered in the student's name. Must provide copy of car title or registration. Otherwise, \$0.00	
Car Insurance	\$	Copy of insurance billing statement. Insurance and billing statement must be in the student's name	
Health Insurance	\$	Document ONLY if the insurance is in the student's name. If you are covered under your parents insurance, leave blank.	
Other	\$	Documentation Required	
Other	\$	Documentation Required	
TOTAL EXPENSES	\$0.00		
Student Signature		 Date	

Date