BENNINGTON COLLEGE

Student Name:_____ Date:_____

PARENT EXPECTED INCOME	Calendar Year 2023
Income from work/business	
Severance payment(s)	
Unemployment benefits	
VA benefits, pension or annuity income	
Social Security benefits (total for household)	
Child support or alimony received	
AFDC/ADC	
General Relief, Food Stamps	
** Value of food, shelter, clothing, cash, etc. provided by another person or group **	
** Value of bills paid by another person or group (partner, church, employer, etc.) **	
Estate/trust/inheritance income	
Interest or dividend income	
Expenditures from savings	
Loan funds utilized	
Credit card debt utilized	
Other income; please list	
TOTAL	

DEPENDENT STUDENT EXPECTED INCOME	Calendar Year 2023
Income from work/business	
Severance payment(s), Unemployment benefits	
VA benefits, pension or annuity income	
** Value of bills paid by another person other than custodial parent (partner, church, etc.) **	
Estate/trust/inheritance income	
Interest or dividend income	
Other income; please list:	
TOTAL	

Explanation of any special circumstances:

** If support received from or expenses paid by another person or group:

Name of person _____ Relationship_____

By signing this worksheet, I (we) certify that all information reported is complete and correct to the best of my knowledge.

Student Signature _____ Date:_____

Parent Signature (if student is dependent) _____ Date:_____