BENNINGTON COLLEGE

Name:			
	Independent Student's Expected	Household Inco	ome 2025
	LIST ALL HOUSEHOLD INCOME	MONTHLY	TWELVE

LIST ALL HOUSEHOLD INCOME	MONTHLY	TWELVE
FOR THE CALENDARYEAR 2025		MONTHS
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		
Section 8 Housing Supplement		
State assistance for heating expenses		
** 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 household income; please list		
TOTAL		

** If support received from or expenses paid by someone outside the household:					
Name of person	Relationship				
	prior-year circumstances that led to requesting that we tion of your finances and aid eligibility:				
By signing this worksheet, I (we) cer	tify that all information reported is complete and correct.				
Student Signature	Date:				
Spouse's Signature	Date:				