Graduate Student Budget Worksheet: 2016-2017

General Information

Name: ____________________________________________
Home Phone: ____________________________
Work Phone: ____________________________ Anticipated
Cell: ____________________________ Graduation Date: ______________
E-mail: ____________________________________________
Where did you attend undergraduate school? ____________________________________________

Educational Plans for 2016-2017

How many courses do you plan to take during the following?

Summer Term 2016: ____________
Fall 2016: ____________
Spring 2017: ____________

Educational Resources

Will you receive a waiver, employment voucher, or assistantship to assist you with the cost of your graduate studies? ______
If so, which benefit will you receive? ____________________________
How many courses will the benefit pay for? ____________________________
Which semester(s) do you plan on using this benefit? ____________________________

Off-Campus Living Expenses

Do you wish to include off-campus living expenses in your application for student loan assistance? ____________

Do you need to purchase the St. Lawrence University Student Health Insurance? ____________

If yes, please be aware of the off-campus maximum allowances based on your status. Check the appropriate budget line, or create your own customized off-campus budget in the space provided below.

<table>
<thead>
<tr>
<th></th>
<th>Total Allowance:</th>
<th>Check Here</th>
</tr>
</thead>
<tbody>
<tr>
<td>Single</td>
<td>$2,200 per semester</td>
<td>_________</td>
</tr>
<tr>
<td>Single-with children</td>
<td>$2,800 per semester</td>
<td>_________</td>
</tr>
<tr>
<td>Married</td>
<td>$3,400 per semester</td>
<td>_________</td>
</tr>
<tr>
<td>Married-with children</td>
<td>$4,000 per semester</td>
<td>_________</td>
</tr>
</tbody>
</table>

Customized Off-Campus Budget:
Rent: ____________________________ per semester
Utilities: ____________________________ per semester
Groceries: ____________________________ per semester
Daycare: ____________________________ per semester
Total: ____________________________ (NOTE: this amount cannot exceed the maximum allowed for your category as stated above.)