

Off Campus Living Budget

This worksheet is to help students develop a financial plan for their semester/monthly budget. Compare your total expenses with your total income. Your income should be greater than your expenses. If that is not the case, try to reduce your expenses and/or increase your income.

INCOME (Annual)

ONE-TIME INCOME

Scholarship/Grants \$ _____
Monetary Gifts Received \$ _____
Loans \$ _____
Other \$ _____
Total \$ _____

ANNUAL INCOME

Salary/Work Wages \$ _____
Stipend \$ _____
Allotment (From parents) \$ _____
Other \$ _____
Total \$ _____

EXPENSES (Annual)

SCHOOL RELATED

Tuition \$ _____
Fees \$ _____
Books and Supplies \$ _____
Meal Plan \$ _____
Other \$ _____
Total \$ _____

NON SCHOOL RELATED

Renters Insurance \$ _____
Health/Medical insurance \$ _____
Vehicle Insurance \$ _____
Other \$ _____
Total \$ _____

TRAVEL RELATED

Airfare \$ _____
Train \$ _____
Hotel \$ _____
Other \$ _____
Total \$ _____

TRANSPORTATION

Car Payment \$ _____
Fuel \$ _____
Vehicle Maintenance \$ _____
Public Transportation \$ _____
Other \$ _____
Total \$ _____

HOUSING

HOUSEHOLD

Rent	\$ _____
Electric	\$ _____
Gas	\$ _____
Water	\$ _____
Heat	\$ _____
Air Conditioning	\$ _____
Phone Bill(s)	\$ _____
Cleaning Supplies	\$ _____
Cable/Wifi	\$ _____
Furniture	\$ _____
Other	\$ _____
Total	\$ _____

Food	\$ _____
Toiletries	\$ _____
Laundry	\$ _____
Other	\$ _____
Total	\$ _____

CLOTHING

School Clothes	\$ _____
Work Clothes	\$ _____
Other	\$ _____
Total	\$ _____

MONETARY COMMITMENTS

Loan Payment(s)	\$ _____
Credit Card Payment(s)	\$ _____
Membership Dues	\$ _____
Subscriptions	\$ _____
Gifts (Holiday)	\$ _____
Gifts (Birthday)	\$ _____
Gifts (Celebration)	\$ _____
Other	\$ _____
Total	\$ _____

RECREATION

Eating Out	\$ _____
Entertainment	\$ _____
Other	\$ _____
Total	\$ _____

Total Income \$ _____

Total Expenses \$ _____

Grand Total (+/-) \$ _____