

PERSONAL FINANCIAL STATEMENT

I. Personal Profile

Name: _____ Age: _____ Social Security No.: _____

Address: _____ Own? _____ Rent? \$ _____ per month

Married? _____ Separated? _____ Number of Dependents: _____ Age of Dependents _____

Your employer: _____ Years: _____ Position: _____

If employed less than one year, previous employer: _____ Years: _____

II. Financial Information

This is a statement of:
 my individual financial condition: _____ the financial condition of myself and my spouse or partner:

ESTIMATED ANNUAL INCOME	ESTIMATED ANNUAL EXPENSES
Employment (incl. field work, work study, etc.) \$ _____	<u>Academic</u> Tuition \$ _____ Tuition CPE (if applicable) \$ _____ Books & supplies \$ _____ Fees (medical, library, etc.) \$ _____ Subtotal \$ _____
Summer (NB: no earnings will be received from CPE) \$ _____	<u>Living</u> Housing \$ _____ Food \$ _____ Utilities \$ _____ Clothing \$ _____ Laundry/cleaning \$ _____ Recreation \$ _____ Subtotal \$ _____
Other (scholarships, grants, prizes, etc.: describe) \$ _____ \$ _____	<u>Other</u> Life insurance \$ _____ Dental insurance \$ _____ Medical insurance \$ _____ Auto (incl. insurance) \$ _____ Loan repayments \$ _____ (Total amount of loan(s) outstanding \$ _____) Taxes \$ _____ Expenses not listed (describe: e.g., alimony) \$ _____ \$ _____ Subtotal \$ _____
Special sources Pensions, Veterans' Aid, etc. \$ _____ Partner, parents, relatives \$ _____ Parish \$ _____ Savings \$ _____ Other (describe: e.g., securities) \$ _____ \$ _____ \$ _____ \$ _____	Subtotal \$ _____
TOTAL ESTIMATED INCOME \$ _____	TOTAL ESTIMATED EXPENSES \$ _____
Please list here any assets (e.g., savings, stocks and bonds, real estate) not covered above: _____ _____ _____ _____ _____	
TOTAL ASSETS \$ _____	

III. Financial Plan

In view of the financial data given in Part II, and keeping in mind the fact that seminary or other appropriate study and some of the requirements of the ordination process (e.g., CPE) may preclude full-time work, how do you plan to finance your theological education?

Signature of applicant: _____

Date: _____

Please return this form to the Vocations Office, 1055 Taylor Street, San Francisco, CA 94108

