ARIZONA CAREER PATHWAYS Required Documents

Initial Int	erview with Career Counselor
	Monthly Budget Sheet filled out in pencil
	Bills for one month (including rent/mortgage, utilities, credit cards, loan payment, cell phones, auto insurance, Etc.)
	Pay stubs for household for two months
	Documentation of income from sources other than work (Child support, SSI, Disability, Unemployment. pensions)
	Letter from State assistance (ie: DES - AHCCCS, food stamps, TANF, housing, child care or utility asst. WIC, etc.)
	Social Security Card
	Drivers License or Picture I.D.
	College ID
	H.S. Diploma or G.E.D.
	Last year's Federal and State tax return forms
	Most recent Bank Statement-checking/savings (1 month)
	School schedule if you are already registered or have been accepted into a program.
If already	in a school program or if you have attended college
	Financial Aid information
	Grades and/or Progress Report or transcripts
	Unofficial transcripts of previous college course work
	Previous college degree (s) or certifications



DOCUMENTATION REQUIREMENT SHEET

Arizona Career Pathways 108 N. 40th Street South Building Room 1146 Phoenix, AZ 85034 602.286.8092 www.azcareerpathways.org

DETERMINATION OF NEED WORKSHEET INSTRUCTIONS

The following are brief explanations of some terminology you will encounter when filling out the Determination of Need Worksheet.

Accurate and complete responses to all items are essential.

INCOME

Include income from all adult household members living at home regardless of relationship, i.e. spouse, children, etc.

WAGES: Gross wages and net wages from candidate and spouse (if applicable).

CHILD SUPPORT: The amount actually received, not the amount awarded by the court if the full amount is not

being received.

PELL, GRANTS, ETC.: The monthly amount received from ANY TYPE of financial aid. Divide the total grant

award for the semester by the number of months the award covers to get the monthly

amount.

EXPENSES

MORTGAGE OR RENT: The amount of mortgage or rent paid. If receiving housing assistance, include the total

amount received plus your portion of the rent. If sharing this expense, list your part only.

Homeowner's association fees, Renter's insurance.

UTILITIES: The amount paid for electricity, gas, water, and basic telephone monthly. If receiving

utilities assistance, include both the amount received and the amount you pay.

ESTIMATED FOOD BILL: Include the cost of meals eaten out and the amounts paid for food. If receiving Food Stamps,

include this total plus any additional money spent monthly on grocery items.

TRANSPORTATION: Car payment, gas/oil/car repair, and insurance payments made monthly. If you (family)

own more than one car, include the total of all car related costs.

CHILD CARE/

SCHOOL TUITION: The monthly amount paid for childcare. Include payments made by someone else on your behalf,

e.g. DES, etc. Private School Tuition is the total amount paid monthly on child (ren)'s school

tuition.

LOANS/CREDIT CARD

PAYMENTS: The total amount paid monthly on credit cards or for loans (student or personal).

CELLULAR PHONES: The total amount paid monthly on cell phone services.

CABLE OR SATELLITE TV: The total amount paid monthly for cable TV or satellite services.

ESTIMATED

MISCELLANEOUS EXPENSES: The total amount paid monthly for PETS, cigarettes, alcoholic beverages, personal care items

(shampoo, soap, toothpaste, diapers, etc.), perfume/aftershave, lipstick, jewelry, vacations,

diapers, baby formula, other baby essentials etc.

ASSISTANCE:

HOUSING ASSISTANCE: The total housing assistance received each month, regardless of source, e.g. parents, friends.