

Business/Farm Asset Form

Instructions: Please complete the items below and return to:

Bloomsburg University
Office of Financial Aid
119 Warren Student Services Center
400 East Second St.
Bloomsburg, PA 17815

Student Name: _____

BU ID#: _____

	STUDENT	PARENT(S)
Business value	\$ _____ .00	\$ _____ .00
Business debt	\$ _____ .00	\$ _____ .00
Farm value	\$ _____ .00	\$ _____ .00
Farm debt	\$ _____ .00	\$ _____ .00

Please read, sign, and date.

All of the information provided by me or any other person on this form is true and complete to the best of my knowledge.

Student _____

Date _____

Father/Stepfather _____

Date _____

Mother/Stepmother _____

Date _____