

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 (& SPOUSE)

Business value \$ \_\_\_\_\_ .00

Business debt \$ \_\_\_\_\_ .00

Farm value \$ \_\_\_\_\_ .00

Farm debt \$ \_\_\_\_\_ .00

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**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 \_\_\_\_\_

Student's Spouse \_\_\_\_\_

Date \_\_\_\_\_