

## **Office of Student Financial Services**

One Winooski Park, Box 4 Colchester, VT 05439 Tel. 802-654-3243 Fax: 802-654-2591

E-mail: finaid@smcvt.edu

## 2023-2024 Student Asset Worksheet

ne date the NA.
e below.)
ng Date
mpt funds,
ng Date
residence.

4. BUSINESS AND/OR INVESTMENT FARM VAL	.UENot applicable: No business and no investment farm owned.
If applicable complete the items listed below:	
<b>Include:</b> The market value of land, buildings, musiness or investment farm was used as collated	nachinery, equipment, inventory, etc. and only those debts for which the eral.
<b>Do not include:</b> The value of a family farm or t that has 100 or fewer full-time/full-time equiva	the value of a small business that you or your family own and control and lent employees.
Description	
Current market/resale value of business/invest	ment farm \$
Amount of unpaid debt for business/investmen	nt farm \$
•	ation reported on this form is true, complete and correct. I understand that reduction, withdrawal or repayment of financial aid.
Please print and sign before submitting. We <u>CA</u>	ANNOT accept digital signatures.
Student's Signature	Date
Spouse's Signature	Date