SUNY Ulster Financial Aid Office 491 Cottekill Rd., Vanderlyn 105 Stone Ridge, NY 12484 (Phone) 845 687-5058 (Fax) 845-687-5172



Email: Financialaid@SUNYUlster.edu

Student Asset Information		
Student Name:	SS#:	
Please complete entire form.		
(If the answer is zero (\$0) you must enter a "0" for each blank.)		
As of today	Student	Parent (if applicable)
What is the net worth of your/or parents' current investments?	\$	\$
What is the net worth of your/or parents' current business (if you own one)?	\$	\$
What is the net worth of your/or parents' investment farm (if you own one)?	\$	\$
What is your/or parents' current balance of cash, savings, checking accounts?	\$	\$
Parent information is required for all <i>Dependent Students</i> . If left blank for a Dependent Student, the form will be considered incomplete and cannot be processed. Please review the Department of Education Dependency Status guidelines to determine if the student is Dependent or Independent.		

Student Signature: _____ Date: _____

Parent Signature: _____ Date: _____

Parent Name: _____