

Room U-201 P: 718.368.4644 F: 718.368.4656 − ★ DREAMS BEGIN HERE ★ − finaid@kbcc.cuny.edu Kingsborough Community College Of The City University of New York 2001 Oriental Boulevard Brooklyn, New York 11235

## 

**Office of Financial Aid** 

<u>PLEASE PRINT BELOW</u>					
Last Name:	First Name:				
EMPLID #:					
CASH, SAVINGS, and C	: <mark>HECKING</mark> - The va ntation. Please pr		e assets appears u	nancial aid application. unreasonably low or lower th as of the date you filed you	
	Penc	orted in Question #41 (stuc	lent) or #90 (par	ant)	
application. Please provide	ported value of y the value of all y	our investment assets app our investment assets.	ear to be undere	stimated or was not reporte	d at all on you
Stocks Mutu	al Funds	Bonds	Others		
Property A		Property B		Property C	
Does a family member rent this property?	□ Yes □ No	Does a family member rent this property?	Yes No	Does a family member rent this property?	□ Yes □ No
Market Value		Market Value		Market Value	
Mortgage Owed		Mortgage Owed		Mortgage Owed	
% of house as rental		% of house as rental		% of house as rental	
Net Worth		Net Worth		Net Worth	
TOTAL			\$	· · · ·	
You may use following we tps://www1.nyc.gov/asset https://www.propertysha	ts/finance/jump/ rk.com/mason/		https://www.zil		
BUSINESS INFORMATI		am/ Parents are Self Empl		-	
		eople? YES 🗌 NO 🗌 (If I	-		

## Reported in Question #43 (student) or #92 (parent)

**STUDENT/PARENT CERTIFICATION:** I/we declare that all information submitted on this form is true and complete.

Business Value \$\_\_\_\_\_ (-) Business Debt \_\_\_\_\_ (=) Net Worth \_\_\_\_