FINANCIAL AID OFFICE



2100 16th Avenue South, Great Falls, MT 59405 [406] 771.4334 Fax: [406] 771.4410 www.gfcmsu.edu

2023-2024 Asset Form

Spouse	Type of Asset	Parent(s) (if dependent)
\$	Cash, savings, and checking accounts	\$
\$	Current net worth of investment (investment value minus investment debt)	\$
\$	Current net worth of business (business value minus business debt) DO NOT include the <i>value</i> of a small business if your family owns and controls more than 50% of the business and the business has 100 or fewer full time employees	\$
\$	Current net worth of investment farm (investment farm value minus investment farm debt) DO NOT include the <i>value</i> of a family farm that you live on and operate.	\$
\$	Other Asset (please describe)	\$
	atures below, all the information provided by myself and/or others is edge. I/we understand that the Financial Aid Office may request adation. (Note: If you are a dependent student, you and a parent must species must sign.)	ditional documenta
the above informed, your	spouse must sign.)	

Submit completed form through secure means (fax, U.S. mail, personal delivery). To maintain security, do not email the completed

form.