



**Hinds Community College  
Office of Financial Aid  
2015-2016  
Dependent Simple Need Test**

Please read carefully and answer all questions as it relates to you.

Student's Last Name	Student's First Name	Student's M.I.	Student's ID# or Social Security#
Address (Include apt. no.)			Student's Date of Birth
City	State	ZIP Code	Student's Phone Number (include area code)

**STUDENT**

As of today, what is your total current balance of cash, savings, and checking accounts? Do not include student financial aid.	□ □ □ , □ □ □
As of today, what is the net worth of your investments, including real estate (not your home)? Net worth means current value minus debt.	□ □ □ , □ □ □
As of today, what is the net worth of your current businesses and/or investment farms? Do not include a farm that you live on and operate.	□ □ □ , □ □ □

**PARENT(s)**

As of today, what is your parents' total current balance of cash savings, and checking accounts?	□ □ □ , □ □ □
As of today, what is the net worth of your parents' investments, including real estate (not your parents' home)? Net worth means current value minus debt.	□ □ □ , □ □ □
As of today, what is the net worth of your parents' current businesses and/or investment farms? Do not include a farm that your parents live on and operate.	□ □ □ , □ □ □

By signing this worksheet, I (we) certify that all the information reported on this form is complete and correct.

WARNING: Each person signing certifies that all of the information reported is complete and correct. If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to prison, or both.

Student	Date
Parent/Stepparent (if applicable)	Date