



Hinds Community College
Office of Financial Aid
2015-2016

Independent 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. ,

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