Villanova University
Office of Financial Assistance
800 Lancaster Avenue
Villanova, PA 19085
Fax: (610)519-7599

RENTAL PROPERTY SUPPLEMENT
2008-2009 ACADEMIC YEAR

Student's Name: *(print)*_____ VU Student ID Number:_____

The Office of Financial Assistance requires additional information in order to accurately assess your child's eligibility for financial assistance for the 2008/2009 academic year. We cannot continue processing your request for assistance until this form is returned.

Type of Rental Property Owned (Check the appropriate box):

☐ House ☐ Condo ☐ Office Building ☐ Other: _____

Address of Property: _____

_____

_____

Year property was purchased: _____

Purchase Price: $ _____

Current Market Value: $ _____

Current Mortgage: $ _____

Your Percentage of Ownership: _____%

*** A separate form for each rental property that you own must be completed and submitted to the Office of Financial Assistance.**

_____
Parent's Name *(print)*

_____
Parent's Signature Date

Note: Consideration of financial assistance cannot be determined until this form is completed and returned to the Office of Financial Assistance.