

Office of Financial Aid
2016-2017 Asset Worksheet

Student Name: _____

SSN (last 4 digits): _____

We are requesting that you complete the following information. Don't leave any of these questions blank. **If a question doesn't apply, write in "0".** Use figures as of the day the **original** Free Application for Federal Student Aid (FAFSA) was completed. Round figures to the nearest dollar. **Don't include personal or consumer loans or any debts that are not related to the assets listed or student financial aid. Dependent students must complete with his/her parent. Independent students must include spouse's information, if married.**

	Student	Parent (if applicable)	Spouse (if applicable)
Cash, savings, and checking accounts. Enter your total balance of cash, savings, and checking accounts as of the day the original FAFSA was completed. Do not enter average monthly balances.	\$	\$	
Investment value - include the following: <ul style="list-style-type: none"> • Real estate other than the home you live in (rental property, summer house, land) • Trust funds • UGMA and UTMA accounts • Money market funds, mutual funds, CD's, stocks, stock options, bonds, other securities • Installment and land sale contracts, commodities • Qualified educational benefits or education savings plan (i.e. Cover all savings account, 529 college savings plans and the refund value or 529 prepaid tuition plans) 	Net Worth	Net Worth	
***Net worth means current value minus debt associated with investment. If net worth is negative, enter 0.	\$	\$	
Investments - DO NOT include: <ul style="list-style-type: none"> • The home you live in • Value of life insurance • Retirement Plans 			
Business and/or investment farm value includes: <ul style="list-style-type: none"> • The market value of land, buildings, machinery, equipment, inventory, etc 	Net Worth	Net Worth	
***Net worth means current value minus debt associated with business and/or farm. If net worth is negative enter, 0.	\$	\$	
Business and/or investments farm value - DO NOT include: <ul style="list-style-type: none"> • Value of a small business (fewer than 100 full-time employees) and is family owned and controlled more than 50% (your family includes: persons who are directly related to you or who are related by marriage) • The value of a family farm that you (your spouse and/or parents) live on and operate. 			

Certification and Authorization:

By signing this form, we certify that all the information reported is complete and correct. I understand that if I purposely give false or misleading information on this form, I may be fined, sentenced to jail, or both.

Student Signature: _____

Date: _____

Parent Signature _____

Date: _____

(Required for Dependent Students)