



MAIL THIS FORM TO:
SUNY New Paltz
Financial Aid Office, 200 Hawk Drive
New Paltz, NY 12561-2437

Form F

Print Name _____ Student ID _____

ASSET VERIFICATION WORKSHEET

Your application has been selected for verification. Federal regulations may require the Financial Aid Office to verify the accuracy of reported assets as part of the verification process. Report values as of the date the 2016-2017 FAFSA was completed. ***If there is no value, enter \$0 in each section.***

Total current balance of student's (and spouse's) cash, savings, and checking accounts. Please report principal amounts, not the interest generated from the principal amount. \$ _____

Total current balance of parents' cash, savings, and checking accounts. Please report principal amounts, not the interest generated from the principal amount. \$ _____

Net worth of student's (and spouse's) investments including stocks, stock options, bonds, money market funds, UGMA and UTMA accounts, securities, commodities, mutual funds, CD's, trust funds, and qualified educational benefits or education savings accounts. \$ _____

Net worth of parent (and stepparent) investments including stocks, stock options, bonds, money market funds, UGMA and UTMA accounts, securities, commodities, mutual funds, CD's, trust funds, and qualified educational benefits or education savings accounts. \$ _____

Real Estate/Rental Property. Provide information for each real estate investment property separately. Do not list the home in which you live in. However, you must report a rental property unit that is within a family home that has its own entrance, kitchen, and bath rented to someone other than a family member. Use the back of the form if more than 2 properties are owned. Report installment and land sale contracts (including mortgages held).

Address 1 _____ Address 2 _____
Market Value \$ _____ Market Value \$ _____
Mortgage Owed \$ _____ Mortgage Owed \$ _____
Purchase Price \$ _____ Purchase Price \$ _____
Year of Purchase _____ Year of Purchase _____

Business and/or Investment Farm Value. Use back if more than one business is owned.

Type of business/investment farm _____

Number of full-time or full-time equivalent employees _____

Percentage of business family owns and controls _____%

Market value of business including land, buildings, machinery, equipment, and inventory. \$ _____

Debt of business. Include only those debts for which the business or investment farm was used as collateral. \$ _____

Student Signature _____ Date _____

Parent Signature _____ Date _____