

STUDENT ASSET FORM

: _____ B-Number: _____

Enter total amount the student received in child support for the last complete calendar year. If the answer is zero or the question does not apply, enter 0. \$ _____

What was the total

SAVINGS/CHECKING accounts?

day you submitted your FAFSA. Enter the total of all accounts. If the total is negative, enter 0. Do not include student financial aid. \$ _____

What was the net worth o

I certify that the information provided on this form is true and correct to the best of my knowledge.

Student signature: _____

Date