AZUSA PACIFIC UNIVERSITY

Graduate Student Financial Services

Student Asset Worksheet

VERIF
2013-2014

Please complete all fields on this form using a black or blue pen. Incomplete forms will be returned and will cause a delay in processing your financial aid application.

APU ID#: _____ Academic Program: _____

Name: _____ _____ _____
Last *First* *M.I.*

IMPORTANT! Please make sure all sections are filled out completely, or this form will be returned to you. **All amounts listed here MUST be the amounts as of the date you filed the FAFSA.** If the amount is zero or the question does not apply, **please write "0."**

1) CASH, SAVINGS, AND CHECKING ACCOUNTS

Cash = $	**Savings** = $	**Checking** = $

2) INVESTMENTS

INCLUDE: real estate, trust funds, UGMA and UTMA accounts, money market funds, mutual funds, certificates of deposit, stocks, stock options, bonds, other securities, installment and land sale contracts (including mortgages held), commodities, qualified educational benefits or education savings accounts, etc..

DO NOT INCLUDE: the home you live in, the value of life insurance, retirement plans (401[k] plans, pension funds, annuities, noneducation IRAs, Keogh plans, etc.) or cash, savings and checking accounts already reported above, UGMA and UTMA accounts for which you are the custodian, but not the owner.

Net Worth as of date FAFSA was filed (Current Market Value minus Debt) **$**

3) BUSINESS AND/OR INVESTMENT FARM

INCLUDE: the market value of land, buildings, machinery, equipment, inventory, etc.

DO NOT INCLUDE: the value of a small business if your family owns and controls more than 50 percent of the business and the business has 100 or fewer full-time or full-time equivalent employees, the value of a family farm that you (your spouse and/or your parents) live on and operate.

Net Worth as of date FAFSA was filed (Current Market Value minus Debt) **$**

By signing this form, I affirm that all information on this form and any attachments are complete and accurate to the best of my knowledge. If requested, I agree to provide documentation to support the information I have provided on this form. I understand that any false statements or misrepresentation may be cause for denial, reduction, withdrawal, and/or repayment of financial aid, and I may be subject to a fine, imprisonment or both, under provisions of the United States Criminal Code.

_____ _____
Student Signature ***(Required)*** **Date**

MAILING ADDRESS
AZUSA PACIFIC UNIVERSITY • GRADUATE CENTER: SFS • P.O. BOX 7000 • AZUSA, CA • 91702-7000
Phone (626) 815-4570 • Fax (626) 815-4545