For Office Use Only:		
Approved by:		



2025-2026 Asset Verification Form Parent

Student Name:		ID # or SSN:		
Yourfi	financial aid package will not be determined	until this form is completed and returned to the Financial Aid Office.		
Studer		ation reported for your parents on the Free Application for Federal pplete the items listed below and return this form to the Financial the original FAFSA was completed.		
outsta		the current value of the asset and then reducing the value by any parent(s) are not the sole owner(s), they need only report the net		
1.	second or summer homes, but does no parent(s) own and live in a multi-family the house which is rented to other pe	ner real estate: Write in the net worth of real estate. Real Estate includes rental property, land, and or summer homes, but does not include the home that you and/or your parents live in. If your s) own and live in a multi-family dwelling, please report the net worth based on the percentage of use which is rented to other people. Determine the value using the price you would ask if the cy were put on the market for sale minus any outstanding mortgage balance.		
	Address of property #1	Net worth \$		
	Address of property #2	Net worth \$ Net worth \$		
	Address of property #3	Net worth \$		
2.	or farm that is family owned and oper value using the price you would have asl value includes the market value of land,	net worth of any business and/or farm. (Do not include any business ated and has 100 or fewer full-time employees). Determine the ked for the business/farm if it had been for sale. The business/farm buildings, machinery, equipment and inventory. The debts used to be debts for which the business/farm was used as collateral.		
3.	funds, mutual funds, and certificates of	h of investments. Investments include trust funds, money market of deposits, stocks, bonds, other securities, installment and land rategic metals, etc. Investment value includes the market value of		
4.	. Cash, savings and checking: Write \$	in the amount of money in cash, savings and checking accounts.		
	gning this form, I certify that all of the infor orting documentation if requested by the Fi	mation being reported is complete and accurate. I agree to provide nancial Aid Office.		
Parent	nt Signature – Must be drawn and not typed	 . Date		

Forms can be submitted by:

Fax: 815-224-0638 | Mail: Office of Financial Aid, 815 N. Orlando Smith Rd Oglesby, IL 61348 | In Person: CTC101S Note: Documents submitted via email cannot be accepted due to security reasons.