

Office of Financial Aid Telephone: (415) 257-1350 Fax: (415) 485-3294

50 Acacia Avenue, San Rafael, CA 94901-2298 Email: finaid@dominican.edu

Web site: www.dominican.edu/financialaid

2023-24 Parent Asset Verification Form

Student Last Name	Fi	First Name		Middle Initial		Dominican Student ID Number		
Street Address	City	State	Zip		Ph	one Number		
This form is used to verifusing the amounts that we					(FAF	SA). Please	complete this form	
CASH, SAVIN	GS AND CHECKIN	G ACCOUNTS						
	nks or other institution		checking or saving a	ccounts ar	nd list	the balance	s in those accounts.	
	Parent's Accounts	•	0 0			lance		
Bank:				\$				
Bank:				\$				
Bank:				\$				
> Cash				\$				
OTHER REAL	ESTATE							
Do you	own real estate other	than the home that	t you live in?	☐ YE	ES	□ NO		
•	, what is the current r		•	operties?	\$			
	provide copies of the	•		-				
BUSINESS								
	own a business?			☐ YE	ES	□ NO		
<u>-</u>	, does your business l	have more than 100) employees?	□ YE		□ NO		
	, what is the current r				\$_			
FARM								
Do you	own a Farm?			☐ YE	ES	☐ NO		
•	YES, does your famil	v live on and opera	ate the farm?	☐ YE	ES	□ NO		
	NO, what is the curre	•			\$_			
INVESTMENT	'S							
	own other investmen	ts such as trust fun	ds. money market or	mutual fu	nds. c	certificates o	of deposit, stocks.	
•	etc. (do not count reti		us, money mariet of	□ YE		□ NO	or deposit, stocks,	
	YES, what is the valu		ents	— 11	.s \$	– 110		
- <u>II</u>	1 LS, what is the valu	e of these mivesting	Ziits		Ψ			
Do vou	own a 529 college sa	vings plan?		☐ YE	ES	□ NO		
· ·	YES, what is the valu				 \$			
	125, what is the value	c of the 323 f tun.			Ψ			
CERTIFICATION I hereby affirm that all in knowledge. I understand may be required to pay fit	that if my student reco							
Parent Signature						vate		
Parent email address (for	follow-up questions)							