

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

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2025-26 Parent Asset Verification Form

Student Last Name	Fi	First Name		Middle Initial		Dominican Student ID Number		
Street Address	City	State	Zip		Phone Number			
This form is used to verify using the amounts that wer					(FAF	SA). Please	complete this form	
CASH, SAVING	S AND CHECKIN	G ACCOUNTS						
	ks or other institution		checking or saving	accounts an	d list	the balances	in those accounts	
	Parent's Accounts	·	0 0			lance		
Bank: _				\$				
Bank: _				\$				
Bank: _				\$				
> Cash				\$				
OTHER REAL	ESTATE							
Do you o	own real estate other	than the home tha	t you live in?	☐ YE	S	☐ NO		
IF YES,	what is the current r	net worth (value m	nus debt) of these p	roperties?	\$			
Please p	rovide copies of the	mortgage stateme	nts for the propertie	rs.				
BUSINESS								
Do you o	own a business?			☐ YE	S	☐ NO		
IF YES,	does your business l	have more than 10	employees?	☐ YE	S	☐ NO		
IF YES,	what is the current r	net worth (value m	nus debt) of this bus	siness?	\$			
FARM								
Do you o	own a Farm?			☐ YE	S	☐ NO		
■ IF Y	ES, does your famil	ly live on and oper	ate the farm?	☐ YE	S	☐ NO		
■ IF N	NO, what is the curre	nt net worth (value	e minus debt) of this	farm?	\$		 	
INVESTMENTS	S							
Do you o	own other investmen	its such as trust fur	ds, money market o	r mutual fu	nds, c	ertificates of	deposit, stocks,	
bonds, et	tc. (do not count reti	rement accounts)?		☐ YE	S	☐ NO		
• IF Y	YES, what is the valu	e of these investm	ents		\$			
Do you o	own a 529 college sa	wings plan?		☐ YE	S	□ NO		
■ IF Y	YES, what is the value	ue of the 529 Plan?			\$			
CERTIFICATION I hereby affirm that all info knowledge. I understand th may be required to pay fin	hat if my student reco							
Parent Signature	arent Signature				Date			
Parent email address (for f	ollow-up questions)							