

# University of Massachusetts Medical School

## 2018-2019 Asset Verification Form

Student's Name: \_\_\_\_\_ SSN: \_\_\_\_\_ Phone: \_\_\_\_\_

**INSTRUCTIONS:** In reviewing your application(s) for financial aid we have identified some information that needs clarification. Use information accurate **as of the date you filed the Free Application for Federal Student Aid (FAFSA)**. Incomplete or illegible forms will be returned to applicant unprocessed.

### CASH, SAVINGS, AND CHECKING:

**Parent(s)**  Value of cash, savings, checking account(s) \$\_\_\_\_\_

**Student/Spouse**  Value of cash, savings, checking account(s) \$\_\_\_\_\_

Attach documentation of the value of these assets as of the day your FAFSA was filed ex. account statements.

### INVESTMENTS:

**Parent(s)**  Value of investment(s) \$\_\_\_\_\_

**Student/Spouse**  Value of investment(s) \$\_\_\_\_\_

Attach documentation of the value of these assets **as of the day your FAFSA was filed** ex. account statements). Investments do not include the home you live in, the value of life insurance, nor retirement plans.

### INTEREST AND/OR DIVIDEND INCOME:

**Parent(s)** The interest and/or dividend income reported on your most recent tax return in the amount of \$ \_\_\_\_\_ is not consistent with the current rate of return on the corresponding value of assets reported on the FAFSA and or CSS Profile.

**Student/Spouse** The interest and/or dividend income reported on your most recent tax return in the amount of \$ \_\_\_\_\_ is not consistent with the current rate of return on the corresponding value of assets reported on the FAFSA and or CSS Profile.

Provide a written explanation and attach it to this form.

I certify that the information included on this form is true and accurate, and I am willing to provide additional documentation if requested.

Student's Signature

\_\_\_\_\_

Parent's Signature

\_\_\_\_\_