



Financial Aid
 1530 W. 17th St.
 Santa Ana, CA 92706
 2021-2022

Name of Financial Aid Applicant (Please print)

Last First Middle

Student ID Number: _____

FINANCIAL AID ASSET AND INVESTMENT SUPPLEMENT

In evaluating the information on your FAFSA application that was provided to the Financial Aid Office, it has been determined that some additional information will be required in order to evaluate your family contribution and financial aid eligibility.

This form must be completed and returned to the Financial Aid Office. Do not leave any line blank. Enter zero if that is the appropriate answer.

Provide the correct information as of your FAFSA completion date: _____

- Student/Spouse Parent or Parent's (*adoptive, step or natural*)

1. Value of Cash, Savings and Checking Accounts

The information on the FAFSA was either left blank or there is a discrepancy in the information provided. Complete the following as of the FAFSA completion date. Bank statement (s) reflecting the information reported must be submitted upon request.

	<u>Student</u>	<u>Parent(s)</u>
Cash	\$ _____	\$ _____
Savings	\$ _____	\$ _____
Checking	\$ _____	\$ _____
Money Market, CD, etc.	\$ _____	\$ _____
Total	\$ _____	\$ _____

If there is a discrepancy, please provide an explanation: _____

2. Farm Investments (*Support document(s) must be submitted upon request*)

Do not include the farm you live on and operate. Complete the following as of the FAFSA completion date.

What is the **value** of the Farm Investment owned, including the market value of the land, the buildings, the machinery, equipment, livestock, inventories, etc?

	<u>Student</u>	<u>Parent(s)</u>
	\$ _____	\$ _____

What is the total **debt** against the Farm Investment owned?

	\$ _____	\$ _____
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TOTAL NET WORTH OF FARM INVESTMENT
 (value – debt = net worth)

	\$ _____	\$ _____
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3. Assets and Investments (Support document(s) must be submitted upon request)

➤ **Other Real Estate and Investment Value**

DO NOT INCLUDE your primary residence, the home you live in. List the values of all other real estate you own or are purchasing, including rental property, land, vacation homes, second homes, timeshares, or multi-family dwellings you may own an interest in, as of the FAFSA completion date. List all properties owned:

What is the **market value** of all other real estates and investments? \$ _____
What is the **debt** against all other real estates and investments owned? \$ _____

TOTAL NET WORTH OF ALL OTHER REAL ESTATE AND INVESTMENT VALUE \$ _____ (A)
(Value – debt = net worth)

➤ **Investment Net Worth**

DO NOT INCLUDE the value of Life Insurance and retirement plans, pension funds, Tax Shelter Annuities, IRA accounts, or KEOGH plans, or the value of prepaid tuition plans, etc.

Students who must report parental information on the FAFSA should report as parental investments the following: all College Saver Plans, Coverdell savings accounts, the refund value of 529 college savings plans and state prepaid tuition plans if the account is owned by the parents. If the account is owned by a student, who must report parental information on the FAFSA, the value of the account is not reported

List the value of each investment as of the FAFSA completion date: _____

Bonds	\$ _____	Certificates of Deposits	\$ _____
Trust fund	\$ _____	Money Market Accounts	\$ _____
Partnerships	\$ _____	Stocks and other securities	\$ _____
Mutual funds	\$ _____	Commodities/precious metals	\$ _____
Corporation (value of your portion)			\$ _____
Installment of land sale contracts including mortgages held			\$ _____
Other investments owned:	_____		\$ _____
Comments regarding your assets:	_____		

What is the **total value of all investments?** \$ _____
What is the **total debt against all investment** \$ _____
TOTAL NET WORTH OF ALL INVESTMENTS OWNED (value – debt = net worth) \$ _____ (B)

TOTAL NET WORTH OF ALL INVESTMENTS OWNED (Sum of line A and B) \$ _____
The Financial Aid Office may ask you to submit accounting statements to verify assets

TO THE BEST OF MY KNOWLEDGE ALL OF THE INFORMATION PROVIDED IS COMPLETE AND ACCURATE.

Student's signature _____ Date _____
Spouse's signature _____ Date _____

Dependent Students Only:

Parent 1 (as listed on FAFSA) signature _____ Date _____
Parent 2 (as listed on FAFSA) signature _____ Date _____

It is the policy of the RSCCD to fully comply with the requirements of the Americans with Disabilities Act. (BP 5140) Consistent with that policy, this material is available in alternative formats (such as accessible electronic text). Such materials and other disability accommodations will be provided as needed for program access upon request. Please contact the Financial Aid Office: financial_aid@sac.edu or 714-564-6242 for needed accommodations or alternate formats.