FRAMINGHAM STATE UNIVERSITY

Asset Verification Form
2011-2012

Name_____I.D.#_____
Please Print

This form should be completed by both the student and parent and should be submitted to the Financial Aid Office at Framingham State University.

	Student (& spouse)	Parents
Cash, savings and checking accounts	_____	_____
Other real estate and investments value (Don't include the home.)	_____	_____
Other real estate and investments debt (Don't include the home.)	_____	_____
Business Value	_____	_____
Business Debt	_____	_____
Number of full-time employees	_____	_____
Investment farm value	_____	_____
Investment farm debt	_____	_____

Student's Signature_____Date_____

Spouse's Signature_____Date_____

Parent's Signature_____ Date_____
(dependent student only)

Framingham State University, Financial Aid Office, 100 State Street, Framingham, MA 01701-9101 (508) 626-4534