

Please complete all sections using **BLACK INK**.

\_\_\_\_\_  
 Student's Last Name

\_\_\_\_\_  
 First Name

\_\_\_\_\_  
 Middle Initial

\_\_\_\_\_  
 APU ID Number

**IMPORTANT!** Please make sure all sections are filled out completely, or this form will be returned to you. **All amounts listed here MUST be the amounts that were valid as of the date you filed the FAFSA.** If the amount is zero or the question does not apply, please write "0".

### 1) INVESTMENTS

**INCLUDE:** trust funds, money market funds, mutual funds, certificates of deposit, stocks, stock options, bonds, other securities, Coverdell savings accounts, college savings plans, installment and land sale contracts (including mortgages held), commodities, etc.

**DO NOT INCLUDE:** the home you live in, cash, savings, checking accounts, the value of life insurance and retirement plans (pension funds, annuities, noneducation IRAs, Keogh plans, etc.), or the value of prepaid tuition plans.

Value includes the market value of these investments as of the date you filed your FAFSA.

Value = \$ \_\_\_\_\_

Debt means only those debts that are related to the investments as of the date you filed your FAFSA.

Debt = \$ \_\_\_\_\_

### 2) REAL ESTATE

**INCLUDE:** rental property, second or summer homes, installment and land sale contracts (including mortgages held).

**DO NOT INCLUDE:** the value of the home you live in.

Address of Property:	Value:	Debt/Owed:
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
<b>TOTALS</b>	\$ _____	\$ _____

*By signing this form, I affirm that all information on this form and any attachments are complete and accurate to the best of my knowledge. If requested, I agree to provide documentation to support the information I have provided on this form. I understand that any false statements or misrepresentation may be cause for denial, reduction, withdrawal, and/or repayment of financial aid, and I may be subject to a fine, imprisonment or both, under provisions of the United States Criminal Code.*

\_\_\_\_\_  
 Student Signature

\_\_\_\_/\_\_\_\_/\_\_\_\_  
 Date

**MAILING ADDRESS**

AZUSA PACIFIC UNIVERSITY • GRADUATE CENTER: SFS • P.O. BOX 7000 • AZUSA, CA • 91702-7000  
 Phone (626) 815-4570 • Fax (626) 815-4545