



**Office Use Only**  
**ASSTPE**

**Confirmation of 2017 Assets – Parent**  
Office of Financial Aid and Scholarships  
P.O. Box 3011 Commerce, Texas Phone: 903.886.5096 Fax: 903.886.5098  
[FAO.Verification@tamuc.edu](mailto:FAO.Verification@tamuc.edu)

STUDENT'S NAME: \_\_\_\_\_ CWID: \_\_\_\_\_

This information is required either because a correction to the FAFSA is needed or due to a comment from the Central Processors on the Student Aid Report. Please complete the information below about your assets.

**Important Reminders**

- Net worth means current value minus debt owed on the asset.
- Be sure to enter amounts on each line, even if negative or zero. If not applicable put N/A.
- Report current balance or market value of investments, including real estate,
  - aside from the home in which in which you live,
  - trust funds,
  - Uniform Gifts to Minors Acts (UGMA) and Uniform Transfers to Minors Act (UTMA) accounts,
  - money market funds,
  - certificates of deposit,
  - stocks, stock options, bonds, other securities,
  - Coverdell savings accounts,
  - 529 college savings plans, the refund value of a 529 state prepaid tuition plans,
  - Installment/land sale contracts and mortgages held,
  - Commodities, etc.
- **Do not** include the value of life insurance or retirement plans.
- If you live on a farm that is lived on and operated by yourself, it is **not** considered an investment and should not be reported.
- If you own and control a small business, it should **not** be reported unless you employ more than 100 full-time equivalent employees.

**Asset Information-Parent**

<b>As of today, what is your (and your spouse's) total balance of cash, savings, and checking accounts? Do not include student financial aid.</b>	\$
<b>As of today, what is the net worth of your (and your spouse's) investments?</b>	\$
<b>As of today, what is the net worth of your (and your spouse's) investment of farm and/or business?</b>	\$

**Certification and Signature:** You, the student, and/or the parent(s) of, and/or the student's spouse, if applicable, by signing this form certify:

1. All of the information provided is true and complete to the best of your knowledge
2. All federal and/or state financial aid received as a result of the information on this form will be used solely for purposes to pay the cost of attending A&M-Commerce
3. Will notify the Office of Financial Aid & Scholarships if changes occur to the information provided
4. Agree to provide information requested by the Office of Financial Aid & Scholarships to verify the accuracy of this completed form and/or clear conflicting information on file.
5. Acknowledge that the Office of Financial Aid & Scholarships has the authority to verify information requested and such information may include IRS Tax Return Transcript(s) and/or any other documents from other entities/agencies that can collaborate on the accuracy of the information provided
6. All parties who sign this form certify you are aware that purposely giving false or misleading information can result in a fine of up to \$20,000, sent to prison, or both.

\_\_\_\_\_  
Student's Parent 1 **Printed Name**

\_\_\_\_\_  
Parent 1 **Signature**

\_\_\_\_\_  
Date

\_\_\_\_\_  
Student's Parent 2 **Printed Name, optional**

\_\_\_\_\_  
Parent 2 **Signature, optional**

\_\_\_\_\_  
Date