

Financial Aid Office 1801East Cotati Avenue

1801East Cotati Avenue Rohnert Park, CA 94928 finaid@sonoma.edu sonoma.edu/finaid

Telephone: (707) 664-2389 Fax: (707) 664-4242

2020-21 Blank Assets (Parent)

Student Name	SSU I.D.
Instructions to Parent: After review of your student's financial aid application and/or your 2018 income verification documents, additional information is required. When completing the application, these asset questions were not asked of you. However, collection of this information is now required.	
The date you originally completed the application appears on the Asset Follow Up Notification email recently sent to your student. Please certify the total amount of your assets, as of that date, using the boxes below.	
Section 1: Cash/Savings/Checking	
Cash Amount + Savings Amount +	Checking Amount = Total
Section 2: Investment Net Worth	
Investment Total Value Investment Total Debt (related to investment)	= Investment Net Worth
Instructions for Investment Net Worth	
"Net worth" means current value of your investments minus any debt against those investments.	
Investments include real estate (excluding the home you live in), trust funds, UGMA and UTMA accounts, money market funds, mutual funds, certificates of deposit, stocks, stock options, bonds, other securities, Coverdell savings accounts, 529 college savings plans, the refund value of 529 state prepaid tuition plans, installment and land sale contracts (including mortgages held), commodities, etc.	
Investment value includes the market value of these investments as of the date the financial aid application was completed. (The date you originally completed the application appears on the Asset Follow Up Notification email recently sent to your student.)	
Investment debt means only those debts that are related to the investment the value of life insurance, retirement plans (pension funds, annuities savings, and checking accounts already reported in Section 1 of this f	, non-education IRAs, Keogh plans, etc.) or cash,
Sign This Statement I certify that all the information reported on this form is complet	te and correct.
Parent Name (please print)	Phone Number
Parent Signature	Date