## BOSTON COLLEGE

## 2023-2024 ASSET VERIFICATION FORM

This form is being sent based on the financial aid application materials that have been submitted. The information provided is either incomplete or conflicts with information received from another source. No further processing of financial aid can occur until this information is received by the Office of Student Services. Complete the following information about your family's assets as of the date you filed the Free Application for Federal Student Aid (FAFSA). Do not leave any blank lines. Enter zeroes where appropriate. Please return this form and all appropriate documentation to www.bc.edu/finaidupload. Detailed instructions, including file limitations, are available under the "Applying for Aid" tab at www.bc.edu/undergradaid.

Student Name		Student Eagle ID No	
FAMILY ASSETS (CURRENT VALUE)	Do not leave blan	ks. Enter "N/A" or zeros where appropria	ite.
	Student	Parent(s)	Sibling(s)
Cash and Savings	\$	\$	\$
Trusts	\$	\$	\$
Investments, including Stocks, Bonds, CDs, etc. (Do not include retirement savings such as pen- sion plans, 401K, 403B, etc.)	\$	\$	\$
Educational Savings Plan	\$	\$	
Prepaid Tuition Plan	\$	\$	1
Parent(s) Asset and Expense I:		Do not leave blanks. Enter "N/A" or	•
		Current Value	Current Debt
Housing Status  Own  Monthly Mortgage Amount	t \$	Fair Market Value of Home	Primary Mortgage Loan Balance \$ Date:
Rent Monthly Rental Amount  Other (Explain)	\$	Purchase price  \$  Year purchased	\$ Date:  Home Equity Line of Credit Balance
Other Real Estate		Fair Market Value of Real Estate	\$ Date: Primary Mortgage Loan Balance
Address		\$	\$ Date:
Street		Purchase price	Secondary Mortgage Loan Balance
City	State Zip	\$Year purchased	\$ Date: Home Equity Line of Credit Balance \$ Date:
Other Real Estate		Fair Market Value of Real Estate	Primary Mortgage Loan Balance
Address Street		\$	\$ Date:
		Purchase price	Secondary Mortgage Loan Balance
City	State Zip	\$ Year purchased 	\$ Date: Home Equity Line of Credit Balance \$ Date:
Business/Farm  Schedule C Sole Proprietorship* Partnership* S Corporation* C Corporation* Farm* (Check all that apply) *Attach corres	% of ownership # of employees ponding tax return.	\$ \$ \$ \$	\$ \$ \$ \$
Retirement Savings (Pension plans, 2	401K, 403B, etc.)	\$	\$
Student Signature		Date	
Parent Signature		Date	