2018 - 2019 Dependent Asset Information Form – (EPAST9)

Student Name: ___________________________  Student ID: ______________

In order to continue processing your financial aid, please complete this form to verify your asset information. Complete each blank of the worksheet. Enter ‘0’ where applicable. DO NOT EMAIL documents with Personally Identifiable Information (PII) (i.e. SSN, Full Name, Phone #, Address...).

A. Asset Information

<table>
<thead>
<tr>
<th>Student</th>
<th>Parent(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td>$</td>
<td>As of the day you completed your FAFSA, what was the total balance of cash, savings, and check accounts. (DO NOT include student financial aid)</td>
</tr>
<tr>
<td>$</td>
<td>As of the day you completed your FAFSA, what was the net worth of investments, including real estate. Net worth means current value minus debt. Investments INCLUDE real estate, trust funds, money market funds, mutual funds, certificates of deposits, stocks, stock options, bonds, other securities. Coverdell savings accounts, college savings plans, installment and land sale contracts (including mortgages held), commodities, etc. Investment value includes the market value of these investments as of today. Investment debt means only those debts that are related to the investments. Investments DO NOT include the home you live in, the value of life insurance, retirement plans (pension funds, annuities, non-education IRAs, Keogh plans, etc) and prepaid tuition plans, or cash savings, and checking accounts already reported above</td>
</tr>
<tr>
<td>$</td>
<td>As of the day you completed your FAFSA, what was the net worth of current businesses and/or investment farms. DO NOT include a farm that your or your parents live on and operate.</td>
</tr>
</tbody>
</table>

B. Signatures

Warning: If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.

By signing this worksheet, I (we) certify that all information reported on it is complete and correct.

______________________________  ________________________________  __________________
Student  Date

At least ONE parent must sign

______________________________  ________________________________  __________________
Parent  Date

Failure to complete every section of this form will result in a delayed financial aid package.

To submit the completed form: In person: Office of Financial Aid, Burgin-Dossett – Room 105; Mail: Office of Financial Aid, P.O. 70722, Johnson City, TN 37614; Fax: (423) 439-5855;