



Financial Aid Office
 1355 West Highway 10, Anoka, MN 55303
 Phone: 763.576.4760
 Fax: 763.576.4771

2009-2010 Request For Asset Information

Last Name: _____ **First Name:** _____ **M.I.:** _____ **Student ID or SSN:** _____

Complete the following for you and your spouse or parents, if applicable.

| | Student (and Spouse) (ISRS Screen ISIA) | | Parent(s) (ISRS Screen IPAR) | |
|---|--|---------------------|--|---------------------|
| Total balance of cash, savings and checking accounts as of today: | \$ _____ .00 | | \$ _____ .00 | |
| Total investments (do not include investments held in qualified retirement plans like a 401k or IRA): | \$ _____ .00 | | \$ _____ .00 | |
| Age of oldest parent: | XXXXX | | | |
| Other real estate and investments (do not include the home you live in) | What is it worth today? | What is owed on it? | What is it worth today? | What is owed on it? |
| | \$ _____ .00 | \$ _____ .00 | \$ _____ .00 | \$ _____ .00 |
| | Business (only if it has >100 employees) | \$ _____ .00 | \$ _____ .00 | \$ _____ .00 |
| Farm | \$ _____ .00 | \$ _____ .00 | \$ _____ .00 | \$ _____ .00 |
| Is the family living on the farm? | <input type="checkbox"/> Yes <input type="checkbox"/> No | | <input type="checkbox"/> Yes <input type="checkbox"/> No | |

By signing this form you are certifying the information provided is true and accurate. If you purposely give false or misleading information on this form, you may be fined, be sentenced to jail, or both.

 Student Signature

 Date

 Parent Signature (if applicable)

 Date