



BOISE STATE UNIVERSITY

Financial Aid and Scholarships
Administration Building Room 124
1910 University Drive
Boise, ID 83725-1315

Phone: (208) 426-1664
Fax: (208) 426-1305
Email: FinancialAid@boisestate.edu

Unreported Asset Form 2023-2024

PLEASE USE BLACK INK

Student Name: _____ **Student ID #** _____
(Print or type) Last name First name

The asset information provided on your FAFSA must be accurate as of the day that you originally signed the application. We have found it necessary to confirm the accuracy of your (and/or your parents') assets as reported on your FAFSA. Please provide your (and/or your parents' if their information was required to be reported on the FAFSA) asset information below, based on the date the FAFSA was completed. Please return the completed form to our office, so that we may make the appropriate corrections. If you cannot remember the date that you signed the FAFSA, please refer to the recent email we sent to you, in which we provide you with this date.

For information about what should be included in investments, business value, or investment farm value, please see the notes on page 9 of the 2023-2024 FAFSA. You can find a PDF version online at:

<https://studentaid.gov/sites/default/files/2023-24-fafsa.pdf>

Asset Information	Student (and spouse's) Enter \$0 if none	Parents' Enter \$0 if none
As of the day the FAFSA was completed, what was your total balance of cash, savings, and checking accounts? Don't include student financial aid.	\$	\$
As of the day the FAFSA was completed, what was the net worth of your investments, including real estate? Don't include the home you (your parents) live in.	\$	\$
As of the day the FAFSA was completed, what was the net worth of your current businesses and/or investment farms? Don't include a family farm or family business with 100 or fewer full-time or full-time equivalent employees.	\$	\$

Certify the validity of the above information by signing at the bottom of this page.

By signing this document, I certify that the information reported is complete and correct. If I purposely give false or misleading information, I may be fined, sentenced to jail, or both. Additional information may be requested if further clarification is necessary, or to resolve conflicting information.

Student Signature (Please print this form or use the stylus to sign) Phone Number _____ Date _____

Parent Signature (if parent information was provided on FAFSA) Phone Number _____ Date _____