North Arkansas College

2023 - 2024 Student/Parent Asset Form

Financial Aid Office * 1515 Pioneer Drive * Harrison, AR 72601 * 870-391-3266 * Fax 870-391-3340

financial-aid@northark.edu

Student Name ______ Student ID Number _____

As part of the verification process, the following information needs to be clarified. The information you provide below should reflect the amounts as of the date your application was filed (______).

YOU MUST PROVIDE AN EXPLANATION IF THE AMOUNT IS \$0.

Item	Student/Spouse Amount		Parent/S	tepparent Amount*
The total balance of cash, savings and checking account	ıts \$	_	\$	
The net worth of investments including real estate (not you home)			\$	
Does your business have mo (If yes, you must p	re than 100 employees? provide the net worth.)	Yes		No
The net worth of your business	\$	_	\$	
Do you live on and participate in the operation of your farm? Yes (If no, you must provide the net worth.)				No
The net worth of your investment farm	\$	-	\$	
EXPLANATION OF CHA	ANGES			
I CERTIFY THAT THE INF	FORMATION IS TRUE AND CORRECT.			
STUDENT SIGNATURE				DATE
*PARENT SIGNATURE				DATE
Definitions let Worth: current value minus debt avestment Value: includes the market value of these investments as of the date of application avestment Debt: only those debts that are related to the investments avestments: include real estate, trust funds, money market funds, mutual funds, certificates of deposit, stocks/bonds/other securities, Coverdell savings accounts, college savings plans, installments and land sale contracts (including mortgages held), commodities, etc. Do NOT include the home you live in, the value o life insurance, retirement plans, and prepaid tuition plans.				

Please submit the information requested above to the Financial Aid Office. *Only if you reported parents' income on the FAFSA application.