MORAVIAN UNIVERSITY

2022-2023 Verification of Assets

Previously you were able to skip questions pertaining to your assets on the Free Application for Federal Student Aid (FAFSA). Through the process of completing verification, you are now required to provide asset information needed to finalize your financial aid eligibility for the 2022-2023 academic year. Please review and complete the form in its entirety. This form requires a wet, handwritten signature; so you must print the form, sign it, and return it to the Office of Financial Aid Services. Questions on how to complete the form? Please contact the Office of Financial Aid Services at

finaid@moravian.edu or (610) 861-1330.		
A. Student's Information & Certifications		
Student's Full Name:	Moravian ID:	
I am the:		
Student (as reported above)		
Parent (of the student reported above)		
Parent(s) Name:		
PLEASE READ CAREFULLY BEFOR	E YOU PROCEED TO SECTION B.	
For the purposes of this form, asset net worth means curren	t value of the assets minus what is owed on those assets.	
Assets include:	Assets do not include:	
 Money in cash, savings, and checking accounts Businesses Investments farms Other investments, such as real estate (net value*), UGMA and UTMA accounts for which you are the owner, stocks, bonds, certificates of deposit, etc. *Net value = market value less any liabilities and/or loans 	 The home in which you live UGMA and UTMA accounts for which you are custodian but not the owner The value of life insurance Retirement plans (401[k] plans, pension funds, annuities, non-education IRAs, Keogh plans, etc. 	
B. Asset Information		
Please report the net worth of your asset information as of the day \$0, please simply report \$0.	you completed the FAFSA. If the amounts of any assets a	re
The day your FAFSA was completed:		
Net Worth of Cash, Savings and Checking:		
Net Worth of Investments:		
Net Worth of Business / Farm:		
C. Certification & Signatures		
By signing below, I am hereby certifying that the information	reported on this form is complete and correct.	
Signature (required):	Please return your completed form to the Office of Financial	

WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, sent to prison, or both.

Date:

Aid Services via:

Upload: Xmedius SendSecure Mail: 1200 Main Street

Bethlehem, PA 18018 Fax: (610-) 861-1346

In-person: 1st floor Colonial Hall