

Name _____	WNCC Student ID# _____
<i>(please print)</i>	
Mailing Address _____	
City, ST, Zip _____	
DOB or Last 4 SSN digits _____	Phone _____
E-mail _____	

Your Free Application for Federal Student Aid (FAFSA) did not contain your and/or your spouse's asset **net worth** information. **Net worth means current value minus debt.** We are unable to calculate your eligibility for Federal student aid until this information has been included in your application. Please complete the information below, sign and return this form to the WNCC Financial Aid Office as soon as possible.

\$ _____ 1. As of today, what is your and/or your spouse's (if applicable) total current balance in **cash, savings, and checking accounts?**

\$ _____ 2. As of today, what is the net worth of your and/or your spouse's (if applicable) **investments**, including real estate? (**Do not include the home in which you live in, value of life insurance or retirement plans.**)
***Investments Include:** Real estate, rental property, trust funds, UGMA and UTMA accounts, money market funds, mutual funds, certificates of deposit, stocks, stock options, bonds, other securities, installment and land sale contracts (including mortgages held), commodities, qualified educational benefits or education savings accounts (e.g., Coverdell savings accounts, 529 college savings plans, and refund value of 529 prepaid tuition plans). Investment value means the current balance or market value of these investments as of today. Investment debt means only those debts that are related to the investments.*

\$ _____ 3. As of today, what is the net worth of your and/or your spouse's (if applicable) current business and/or investment farms?
***Include the market value of land, buildings, machinery, equipment, inventory, etc.** Business and/or investment farm debt means only those debts for which the business or investment farm was used as collateral. **Do not include** the value of a small business that you and your spouse own and control that has 100 or fewer full-time or full-time equivalent employees. **Do not include** a farm that you and/or your spouse live on and operate.*

By signing below, I/we certify that all the information reported above is complete and correct. I understand that additional verifying documents may be required by Western Nebraska Community College. *Electronic signatures are not accepted.*

Student signature: _____
Date

Spouse signature: _____
(optional) Date

WARNING: Purposely providing false or misleading information can result in fines, imprisonment, or both.

**Return completed form to:
 WNCC Financial Aid Office • 1601 E. 27th Street • Scottsbluff, NE 69361
 (308) 635-6011 • fax (308) 635-6732
 Secure filedrop: <https://docsafe.wncc.edu/filedrop/FINAID>**