Asset Verification

2026-2027

Office of Financial Aid
1050 North Mills Avenue
Claremont, CA 91711-6101
909.621.8208
Fax:909.607.1205
Financial_aid@pitzer.edu

Student Name (please print) _____ **Student ID (if known)** _____

Additional information is required regarding the assets you reported on the FAFSA and/or CSS Profile. Please note:

- **Do not leave any questions blank.** If a question does not apply to you, please write $0 or N/A.
- For all assets, report the amounts **as of the date you completed the FAFSA** or today's date (whichever came first).
- Do not include personal loans, consumer loans, financial aid, or the value of life insurance policies.

1. Parent Information

Whose information is reported on this form? (Check all that apply)

☐ Both Parents ☐ Custodial Parent ☐ Noncustodial Parent ☐ Stepparent

Parent 1 Name _____ Parent 2 Name (if applicable) _____

2. Cash, Checking, and Savings

List banks or other institutions where you have checking or savings accounts and list the balance in those accounts.

Parent			Student		
Cash, Checking, & Savings	Total Amount	Bank Name	Cash, Checking, & Savings	Total Amount	Bank name
Bank 1			Bank 1		
Bank 2			Bank 2		
Bank 3			Bank 3		
Bank 4			Bank 4		

3. Investments

List all investments noted below. **DO NOT DUPLICATE VALUES.**

Parent	Total Amount	Student	Total Amount
Stocks		Stocks	
Bonds		Bonds	
Certificates of Deposit		Certificates of Deposit	
Trust Funds		Trust Funds	
Mutual Funds		Mutual Funds	
Other Investments		Other Investments	
Retirement accounts such as 401(k), 403(b) or IRA	Parent 1:		
	Parent 2:		

Child Name	529s Total Amount	UTMAs & UGMAs Total Amount
Applicant:		
Child 2:		
Child 3:		
Child 4:		

PITZER COLLEGE
A MEMBER OF THE CLAREMONT COLLEGES

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THE FOLLOWING ASSETS ARE ASSUMED TO BE PARENT ASSETS

4. Home

Do you own the home where you reside? ☐ Yes ☐ No

Physical Address of Home
(Do NOT list P.O. Boxes)

Is this a multi-family home? ☐ Yes ☐ No

If yes, list number of dwellings:_____

Do you rent this property to others? ☐ Yes ☐ No

If yes, list date you began renting (month/year):

_____

If yes, list what percent of your home you rent:

_____

If you rent to family list name(s)/relation:

_____

$ _____ Current Market Value

$ _____ Current Debt (1st and 2nd Mortgages)

$ _____ Purchase Price

_____ Purchase Year

_____ Percent Ownership

If not 100%, who owns the remaining portion?

_____

5. Other Real Estate

Do you own real estate other than the home where you reside? ☐ Yes ☐ No

*If you own more than two properties, itemize each additional property on a separate sheet of paper and attach it to this form.

Physical Address of Property 1
(DO NOT list P.O. Boxes)

$ _____ Market Value

$ _____ Debt

$ _____ Purchase Price

$ _____ Purchase Year

_____ Percent Ownership

If not 100%, who owns the remaining portion?

_____

Physical Address of Property 2
(DO NOT list P.O. Boxes)

$ _____ Market Value

$ _____ Debt

$ _____ Purchase Price

$ _____ Purchase Year

_____ Percent Ownership

If not 100%, who owns the remaining portion?

_____

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6. Business/Farm

Do you own a business and/or farm? (Check all that apply) ☐ Business ☐ Farm ☐ Neither
If you own a farm, do you live on the farm for more than 50% of the year? ☐ Yes ☐ No
*If you own more than three businesses/farms, itemize each additional business/farm on a separate sheet of paper & attach.

Name of Business: **Physical Business Address** (DO NOT list P.O. Boxes): **Business/Farm Product/Function:**	$_____ Market Value $_____ Debt _____ Year Purchased/Opened/Inherited _____ Percent Ownership _____ # of Full time Employees
Name of Business: **Physical Business Address** (DO NOT list P.O. Boxes.): **Business/Farm Product/Function:**	$_____ Market Value $_____ Debt _____ Year Purchased/Opened/Inherited _____ Percent Ownership _____ # of Full time Employees
Name of Business: **Physical Business Address** (DO NOT list P.O. Boxes.): **Business/Farm Product/Function:**	$_____ Market Value $_____ Debt _____ Year Purchased/Opened/Inherited _____ Percent Ownership _____ # of Full time Employees

7. Certification

I certify that the information reported on this form and all supporting documentation is true and accurate to the best of my knowledge. I understand that false statements or misrepresentations will be cause for denial, reduction, withdrawal, and/or repayment of financial aid.

Student Signature _____ Print Name _____ Date _____

Parent Signature _____ Print Name _____ Date _____