

## STUDENT ASSET CLARIFICATION 2023-2024

Student Name (please print)	St	Student Social Security Number Or ID#	
~	t information for you and/or your	epartment of Education determined it parent(s) (if dependent). To make these	
Please provide the information as appropriate.	requested below. All items must	be completed, including '0' if	
Student Assets	Net Worth at	Net Worth at Time FAFSA Was First Completed	
Cash, Savings and Checking	\$	\$	
Net Worth of Investments	\$	\$	
Net Worth of Business/Farm	\$		
	y federal, state, or institutional aid	and that no representation is made with d program. I understand that if I give enced to jail, or both.	
Student Signature	 Da	ite	
RETURN COMPLETED FORM TO:	Mail to: Financial Aid Southeast Technical College 2320 N Career Ave Sioux Falls, SD 57107	Fax to: 605-367-8305  Scan and email to: financialaid@southeasttech.edu	