



Office of Financial Aid
220 Doberstein Admissions Center
320 N Dupont Highway
New Castle, DE 19720
Fax: (302) 328-8905
Email: Finaid@wilmu.edu

2026-2027 Financial Aid Asset Information Request

Student Information:

Last Name _____ First _____ M.I. _____ WOO _____
Student I.D. _____
Address _____ City _____ State _____ Zip code _____ Phone Number _____

Instructions:

Upon review of your verification documents, further clarification is needed for asset values either listed on your federal tax return or left blank on the FAFSA. Please complete **ALL** information below as it was on the date you filed the 2026-2027 FAFSA. If your 2024 federal tax return information reflects "taxable interest earned" you must report the value associated with the asset. **THERE MUST BE DOLLAR AMOUNTS LISTED. IF THIS FORM IS SUBMITTED WITHOUT DOLLAR AMOUNTS, IT WILL BE CONSIDERED INCOMPLETE AND RETURNED TO YOU, THE STUDENT.**

Please also **submit** any of the following schedules filed with your 2023 tax return for both student and parent:

Schedule: 1, 2, 3

Type of Asset	Student (and Spouse)	Parent (s)
Cash & Savings Accounts:	\$ _____	\$ _____
Net Worth (Value minus Debt) of Investments:	\$ _____	\$ _____
<i>Investments include: trust funds, UGMA and UTMA accounts, money market funds, mutual funds, CD's, stocks, stock options, bonds, securities, commodities, qualified educational savings accounts, installment and land sales contracts. Do not include retirement accounts.</i>		
Business Net Worth: <i>Total value includes market value of all assets such as land, buildings, equipment, inventories, etc.</i> <i>Total debt includes mortgage and related debts for assets used as collateral</i>	Total Value: \$ _____ Total Debt: \$ _____ Check Which applies: <input type="checkbox"/> 100 or fewer employees <input type="checkbox"/> More than 100 employees	Total Value: \$ _____ Total Debt: \$ _____ Check Which applies: <input type="checkbox"/> 100 or fewer employees <input type="checkbox"/> More than 100 employees
Partnerships/S-Corporations: <i>If a partnership/S-Corporation is owned by more than one person, only include the portion of the value/debt held by the student and/or parent(s).</i>	Total Value: \$ _____ Total Debt: \$ _____ Do you live on the farm? <input type="checkbox"/> Yes <input type="checkbox"/> No	Total Value: \$ _____ Total Debt: \$ _____ Do you live on the farm? <input type="checkbox"/> Yes <input type="checkbox"/> No
Rental Real Estate Values: <i>*Do not include the home in which you live.</i>	Property Value: \$ _____ Amt owed on property \$ _____	Property Value: \$ _____ Amt owed on property \$ _____

I/We certify that the above information is true and correct to the best of our knowledge.

Student's Signature

Date

Parent's Signature
(Dependent Students Only)

Date