CSUDH

FINANCIAL AID & SCHOLARSHIP OFFICE
1000 East Victoria Street
Carson, California 90747
PHONE: (310) 243-3691

CSUDH ID: _____   Today s Date: _____

Financial Aid Document Submission Cover Sheet

Please complete the information requested below, submit this form along with your documents.

REMINDER: When uploading your documents to the **online Dropbox**, please exercise caution when using Free WiFi or Public Computers as these are not secure.

Student Name: _____
            Enter Last Name, First Name, MI

Toro Email Address: _____

Phone Number: _____   _____
            (Area Code)   *(i.e. 222-1234)*

*Note: Please be sure to include your **CSUDH student ID number** on each page submitted and allow up to 4 business days for your **To Do List** to be updated.*

SUBMISSION INSTRUCTIONS:

On the following page(s), complete all requested information using the fillable document below. Your document must be complete to be accepted by the Financial Aid & Scholarship Office. Forms that are incomplete will remain on your To-Do-List in the Student Center.

1. Upon completing this document, scroll to the bottom where you are asked to sign and date. In the signature area, type or sign your name and in the date space type today's date.

2. **Save your document and** <u>**be sure to include**</u> **your name and CSUDH Student ID#** <u>**within the file name**</u>.

3. If you have attachments, please have them ready to upload to the online Dropbox

4. Return to the Financial Aid Forms page > go to the **blue Dropbox Folders** section > **select the icon that corresponds with your last name** > use the "**Add Files**" or "**drag and stuff here**" option to upload your documents. **Emailed documents will not be accepted.**

5. Once all documents have been submitted, be sure to close your browser.

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In furtherance of CSU Dominguez Hill's mission of accessibility and commitment to excellence through diversity, equity, and inclusion, CSUDH strives to ensure that its information and communication technology is accessible to everyone. If you need assistance in completing this form because of a disability, please contact us at (310) 243-3660

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Student's Name: _____ CSUDH ID# _____

2023-2024 Asset Form (Dependent)

The Financial Aid & Scholarship Office has reviewed your 2023-2024 financial aid application. We are required to verify your assets.

Please answer each question and submit the completed form electronically to the Financial Aid online **Dropbox** located at https://www.csudh.edu/financial-aid/forms/. **Emailed documents will not be accepted**.

1. Date you initially filed the 2023-2024 FAFSA: _____
   To determine the date you initially filed your Free Application for Federal Student Aid (FAFSA) please refer to the confirmation email you received from theOffice of Federal Student Aid at the U.S. Department of Education.

2. As of the date you filed your 2023-2024 FAFSA, what was your and your parents' total balance of cash, savings, and checking accounts?

   Student $_____   Parent $_____

3. As of the date you filed your 2023-2024 FAFSA, what was the net worth of your and your parents' investments? *Investments include: real estate (do not include the family home), 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, commodities, etc., Coverdell savings accounts, 529 college savings plans. Do not include: the value of life insurance, retirement plans (pension funds, annuities, non-educational IRAs, Keogh plans,etc.).*

   Student $_____   Parent $_____

4. As of the date you filed your 2023-2024 FAFSA, what was the net worth of your and your parents' business and/or invest farm? *Do not include the value of a family farm that your parentslive and operate. Do not include the value of a small business if your family owns and controls more than 50% of the business and the business has 100 or fewer full-time employees.*

   Student $_____   Parent $_____

CERTIFICATION AND SIGNATURE
Each person signing below certifies that all of the information reported is complete and correct. The studentand one parent whose information was reported on the FAFSA must sign and date.

> **WARNING: Per the U.S. Department of Education and the State of California, if you purposely give false or misleading information you may be fined, be sentenced to jail, or both.**

Student's Signature: _____   Date: _____

Parent's Signature (required): _____   Date: _____

Parent's printed name (required): _____ Relationship: _____