



**University of the Incarnate Word
Office of Financial Assistance
2026-2027 Asset Verification Form**

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CODE: AVF07

Black Ink Only

Your 2026-2027 FAFSA application was selected for the verification process, and the asset information for either the student/spouse and/or parent/parent's spouse must be provided. In order to complete your verification, please complete and submit this form so that we can verify the required asset information.

Student Name _____ UIW ID _____

Phone Number _____ Email _____

- Please provide the information below **as of the date you originally submitted your 2026-2027 FAFSA**.
- Please **DO NOT** leave any boxes blank; write **"0"** if the asset type does not apply. The form will be considered incomplete if any items are missing or left blank.

Asset Information	Student/ Spouse	Parent(s) (Dependent students only)
Total Cash, Savings and Checking Account amounts	\$	\$
Total Net Worth of your Investments (value of investments minus debt) <ul style="list-style-type: none"> • Real Estate (do not include the home you live in) • Trust funds, money market accounts and mutual funds • Certificates of deposit, stocks, stock options, bonds, education IRAs, 529 college savings plans • Do not include life insurance, retirement plans (pensions, annuities, or non-education IRAs) 	\$	\$
Total Net Worth of your Businesses and Farms (value minus debt) <ul style="list-style-type: none"> • Market value of land, buildings, machinery, equipment, and inventory • Include the value of your (your spouse and/or parents) family farm minus the value of the residence if you live there • Include the value of any small business that you (your spouse and/or parents) own and control 	\$	\$

Certification and Signature(s):

I certify that all information reported on this form is complete and accurate. I understand if I purposely give false or misleading information on this form, I may be fined, sentenced to jail, or both.

Student Signature: _____

Date: _____

Student's Spouse Signature: _____
(If student is married)

Date: _____

Parent or Parent's Spouse Signature: _____
(If student is dependent)

Date: _____

Please note: All signatures must be handwritten and in black ink only. Electronic/typed signatures and signatures made with an electronic pen will not be accepted. Please allow 3-5 business days for review.