Asset and Benefit Eligibility Form
2024-2025

Answer each question regarding the student and if applicable, the students’ supporting parent(s). Visit https://www.ohio.edu/financial-aid/forms for directions on submitting your forms using our Secure Upload Portal or by mail or fax.

Student Name

Student PID (Pxxxxxxxxxx)

Written Student Signature (Electronic Signature Not Accepted)

Date

Written Parent Signature (Electronic Signature Not Accepted)
(Parent signature required for dependent students)

Date

Means-Tested Federal Benefits

1. Please indicate if anyone supported by you or your parent(s) received benefits from any of these programs in 2022 or 2023.

___ Medicaid OR Supplemental Security Income (SSI)

___ Temporary Assistance for Needy Families (TANF)

___ Free or Reduced school lunches

___ Supplemental Nutrition Assistance Program (SNAP) OR Women, Infants, and Children (WIC)

___ None of Above

Assets:

2. Report the requested amounts below that accurately reflect assets as of the completion date of your original 2024-2025 FAFSA. Enter either a ZERO or a dollar value for each item below. Do not leave this blank.

<table>
<thead>
<tr>
<th></th>
<th>Student/Spouse</th>
<th>Parent(s)</th>
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<tbody>
<tr>
<td>Balance of cash, savings and checking accounts</td>
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<td>Value of investments</td>
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<td>(Do not include home, retirement plans, and pensions)</td>
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<tr>
<td>Net Value of Businesses and/or Farms</td>
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</tbody>
</table>

Office of Student Financial Aid and Scholarships
Chubb Hall 020
1 Ohio University Drive
Athens, OH 45701-2979

DO NOT SEND COMPLETED DOCUMENTS
BY EMAIL. PLEASE USE OUR SECURE
UPLOAD PORTAL OR SEND BY MAIL OR FAX.
https://www.ohio.edu/financial-aid/forms

Questions?
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Fax: (740) 593-4140