



Fairfield University Office of Financial Aid

## 2025–2026 Independent Student Asset Clarification Form

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**Instructions:** The financial aid applications you submitted contain conflicting asset information. The Department of Education requires the resolution of conflicting information prior to awarding aid. Please complete this form in its entirety. Do not leave sections blank. Instead, please write a "0" or "N/A" if an asset type does not apply to you. If an asset is owned by multiple parties outside of your household, only include the value and debt of your portion. Complete the following information about the student and/or spouse's

**Business/Farm Value**

Do not leave blanks. Enter "N/A" or zeros where appropriate.

Business/Farm – please check all that apply  <input type="checkbox"/> Schedule C <input type="checkbox"/> Partnership <input type="checkbox"/> S Corporation <input type="checkbox"/> C Corporation <input type="checkbox"/> Farm  *Include only the student and/or spouse's percentage of ownership	Total Market Value of <u>ALL</u> Businesses  \$ _____  *Please add up all of the values of each business to get the total value <b>*Any size business must be included</b>	Total Debt of <u>ALL</u> Businesses  \$ _____ (include all debt owed on any property)  *Please add up all of the debts of each business to get the total debt <b>*Any size business must be included</b>
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To calculate the current value of your business(es), we subtract the debt owed on the business as of the date of the FAFSA form from the market value of the business as of the date of the FAFSA. Please include ALL businesses, regardless of size. All businesses MUST be included on the FAFSA and CSS Profile.

By signing this form, you certify the information reported is true, correct, and complete. The student and one parent whose information was reported on the FAFSA must sign and date. WARNING: Per Federal regulation, if false or misleading information is purposely provided on this worksheet, you may be fined, sentenced to prison, or both. PLEASE DO NOT SIGN THIS FORM ELECTRONICALLY/DIGITALLY

*Fairfield University reserves the right to ask for any supporting documentation, such as bank and/or investment statements, if needed, to substantiate your claims.*

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Spouse's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please upload this form to the student's Net Partner account, or email this form to [finaid@fairfield.edu](mailto:finaid@fairfield.edu). Alternatively, you may send this to our fax number: 203-254-4008, or by mail: Office of Financial Aid, 1073 North Benson Rd, Fairfield, CT, 06824.