

2016-2017 STUDENT REAL ESTATE VALUE VERIFICATION

Student's Last Name: _____

Student's First Name: _____ Student's Middle Initial: _____

Student's 9-digit UCR ID #: _____

TO BE COMPLETED BY STUDENT

6YZcfY'Zi fh\Yf'UM]cb'WUb'VY'hU_Yb'cb'nci f'Z]bUbVU'U]X'Udd'jW]h]cbž'h\Y'Zc`ck]b[']bZcfa Uh]cb']g'fYei]fYX" 'D'YUgY'j Yf]Zm]bZcfa Uh]cb'fY[UfX]b['nci f'fYbhU' dfcdYfmcfc'ch\Yf'fYU'YghUHY' fYI Wl X]b['nci f'\ca YL'

As of the date you filed your FAFSA:

Di fV\UgY'XUHY. _____

Di fV\UgY'df]W'.....\$ _____

FYU'YghUHY'j Ui Y'.....\$ _____

FYU'YghUHY'XYVh \$ _____

5HlUMX'U'DfcdYfmm5ggYgga Ybh'GhUHYa Ybh'UbX'a cfh[U[Y'ghUHYa Ybh'hc'j Yf]Zm]dfcdYfmmj Ui Y'UbX'XYVh'

D'YUgY'WYW\ \YfY]Z'nci 'ck b'a cfY'h\Ub'cbY'fYbhU' dfcdYfmcfc'ch\Yf'fYU'YghUHY''

Please complete one of these forms for each property that you own.

Student's Signature: _____ Date: _____

After you have filled in the information, print, sign, and submit this form to:
 UC Riverside - Financial Aid Office - 900 University Avenue - Riverside, CA 92521
 Phone (951) 827-3878 Fax (951) 827-5619