



VILLANOVA UNIVERSITY

PARENT/STEPARENT'S RENTAL PROPERTY SUPPLEMENT 2012-2013 ACADEMIC YEAR

Please Return to:
Office of Financial Assistance
Villanova University • 800 Lancaster Avenue • Villanova, PA 19085-1685
Phone: (610) 519-4010 Fax: (610) 519-7599
Email: finaid@villanova.edu Website: www.finaid.villanova.edu

Student's Name: *(print in black or blue ink)* _____ Villanova University Number: _____
(8 digit number)

The Office of Financial Assistance requires additional information in order to accurately assess your child's eligibility for financial assistance for the 2012-2013 academic year. We cannot continue processing your request for assistance until this form is returned.

A separate form for each rental property that you own must be completed and submitted to the Office of Financial Assistance.

Type of Rental Property Owned (Check the appropriate box):

House Condo Office Building Other: _____

Address of Property: _____

Year property was purchased: _____

Purchase Price: \$ _____

Parents'/Stepparent's Percentage of Ownership: _____%

Parent(s)'/Stepparent's Portion of Total Current Market Value: \$ _____
(List only the value related to your percentage of ownership.)

Parent(s)' Portion of Total Current Remaining Mortgage Balance: \$ _____
(List only the portion of the debt related to your percentage of ownership.)

Print Name of Custodial Parent/Stepparent Date

Signature of Custodial Parent/Stepparent Date

Note: Consideration of financial assistance cannot be determined until this form is completed and returned to the Office of Financial Assistance. The Office of Financial Assistant reserves the right to utilize internet-based resources to verify information on its forms if warranted during review of this form.