



FINANCIAL AID OFFICE
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2023-2024 Resource Verification Worksheet

You must complete and sign this worksheet, attach any required documents and submit them to the La Salle University Financial Aid Office. To send documents via a secure link: <https://sendsecure.xmedius.com/r/2ba96822f2104ad2b79dbba706c3d788>

Student's Information

Last Name	First Name	M.I.	La Salle ID Number
Street Address (include apt. number)			Date of Birth
City	State	Zip Code	Email Address
Home Phone Number (include area code)			Alternate or Cell Phone Number

Household information

So that we can fully understand your family's financial situation, please provide below information about any other resources, benefits, and other amounts received by the student and any members of the student's household.

Expense Type	Monthly Expense Amount	Monthly Amount Received for Expense	Name and Relationship of Person Who Provided Support
Rent or Mortgage			
Utilities			
Car payment/other transportation			
Car insurance			
Groceries			
Medical Insurance			

Certification and Signature

Each person signing below certifies that all of the information reported is complete and correct.

Student's Signature (Required)	Date
Parent's OR Spouse's Signature (Required)	Date

WARNING: If you purposely give false or misleading information you may be fined, be sentenced to jail, or both.