Office of Financial Aid 100 East 8th Street, Suite 230 Holland, MI 49423 P: 616.395.7765 | F: 616.395.7160 finaid@hope.edu hope.edu/financialaid

Step-Parent Disclosure

2026-27

Student Name: Hope College ID Number:	
<u> </u>	ation and have information that indicates the parent listed on your financial assistance, we need information for your step-parent.
O Submit a signed copy of parent and step-	parent's 2024 federal income tax return with W-2 forms
Date of Parent & Step-Parent's Marriage:	(MM/YYYY)
Name of Step-Parent:	Date of Birth of Step-Parent:
Asset Summary for Parent & Step-F	arent
Current total of cash, savings and checking accou	ints \$
Current net worth of investments, including real	state \$
Don't include the home the parent lives in. Net wo investments minus any debts owed against them.	th is the value of the
Current net worth of businesses and investment f	
Enter the net worth of the parent's businesses or for operations. Net worth is the value of the businesses owed against them.	, , ,
Certifications and Signatures	
Each person signing below certifies that all of the inf	ormation reported is complete and correct. The parent whose nd date. Warning: If you purposely give false or misleading information,
Parent Signature:	Date Signed:
(signature must be in ink)
Parent Signature:	Date Signed:
(signature must be in ink	