

Please Use Black or Blue Ink OSU Student ID ("A" plus 8 digits) Student Legal Name: A

The OSU Office of Scholarships and Financial Aid must, by federal regulations, verify the contributor(s) information on the 2024-2025 Free Application for Federal Student Aid (FAFSA). **We cannot determine aid eligibility or disburse funds until all requested documents are received and reviewed.** In some cases, we must submit changes in information to the U.S. Department of Education (FAFSA processor); at that time, the student will receive communication from our office as well as a FAFSA Submission Summary from the FAFSA processor.

Do not leave an answer blank. If the response is zero, check the "None" box.

Last Complete Calendar Year	Parent(s)	
	Amount	None
List the total amount the contributor (parent) received in annual child support for the last complete calendar year. If the parent listed "married," "remarried," or "unmarried and both legal parents living together," list the combined amount the parent and their spouse received.	\$/yr	

Certification/Signature:

By signing this form, I certify that all the information reported to qualify for federal student aid is complete and correct. If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.

Contributor's (Parent's) Signature (Stylus or ink pen only)

Date

Printed Legal Name of Contributor (Parent) Who Signed Above

Street Address

City

Zip

Return to:

Office of Scholarships and Financial Aid 119 Student Union, Stillwater, OK 74078-5061 Fax: (405) 744-6438 (if you fax, please do not mail the form)

State

Questions?

Email: <u>finaid@okstate.edu</u> Phone: (405) 744-6604 Web: <u>financialaid.okstate.edu</u>

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