## THE UNIVERSITY OF OKLAHOMA STUDENT FINANCIAL CENTER

1000 Asp Avenue, Room 105 Norman, Oklahoma 73019-4078 Phone (405) 325-9000 Fax (405) 325-7608 sfc@ou.edu

#### 2017-2018

# UNIVERSITY OF OKLAHOMA STUDENT FINANCIAL CENTER INDEPENDENT STUDENT VERIFICATION WORKSHEET

Your application was selected for review in a process called "Verification." By law, we have the right to ask you for this information before awarding federal aid. If there are differences between your application information and verification documentation, we will send corrections electronically to the Department of Education to have your information reprocessed.

If you have questions about completing this worksheet, you may contact O.U. Financial Aid Services at (405) 325-4521.

Section A: Please print clearly or type your information.

**Section B:** Family Information. List the people in your household. Include: yourself, your spouse (if you have one), and your/your spouse's children, if you provide more than half of their support from **July 1, 2017 through June 30, 2018**.

Also include other people if they now live with you and you provide more than half of their support and will continue to provide more than half of their support from **July 1, 2017 through June 30, 2018**. Do not include foster children in the household.

Also write in the name of the college any household member will be attending for at least half time during **July 1, 2017 through June 30, 2018.** 

Section C: Sign, date and return the Independent Student Verification Worksheet to the OU Office of Financial Aid Services. Keep copies of everything you send to the financial aid office.

Complete the next page as instructed and return this form to Financial Aid Services.

IVW 10/02/2016

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### 2017-2018 INDEPENDENT STUDENT VERIFICATION WORKSHEET

A. Student Information	:		
Last name	First name	M.I.	Social Security Number
Address (include apt. no.	)		Sooner ID Number
City	State	Zip Code	-
B. Family Information:			d Report and the instructions for this worksheet.)
Full Name	Attach addition	nal sheets if needed to list Relationship	Name of college attending in 17-18
Full Name	Age	Self	University of Oklahoma
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and correct to the best of our	r knowledge. I understar	nd I may be required to submit	reported to qualify for Federal student aid is complete additional documentation to resolve missing, conflicting this worksheet I may be fined, be sentenced to jail, or
Student's Signature		 Date	
Spouse's Signature		 Date	

Return this completed form to: STUDENT FINANCIAL CENTER, 1000 Asp Avenue, Room 216, Norman, OK 73019-4078