## 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

## 2019-2020 UNIVERSITY OF OKLAHOMA STUDENT FINANCIAL CENTER INDEPENDENT STUDENT VERIFICATION WORKSHEET

Your 2019–2020 Free Application for Federal Student Aid (FAFSA) was selected for review in a process called verification. The law says that before awarding Federal Student Aid, we may ask you to confirm the information you and your spouse (if married) reported on your FAFSA. To verify that you provided correct information the financial aid administrator at your school will compare your FAFSA with the information on this worksheet and with any other required documents. If there are differences, your FAFSA information may need to be corrected. You must complete and sign this worksheet, attach any required documents, and submit the form and other required documents to the financial aid administrator at your school. Your school may ask for additional information. If you have questions about verification, contact your financial aid administrator as soon as possible so that your financial aid will not be delayed.

Independent Student Ir	formation				
Student's Last Name	Student's First Name		M.I.	Student's OU ID Number	
Address (include apt. no.)				Student's Social Security Number	
City	State	Zip Code	Phone Number	Student's Date of Birth	

## **Independent Student's Family Information**

List below the people in your household. Include:

- The student.
- The student's spouse, if the student is married.
- The student's or spouse's children if the student or spouse will provide more than half of the children's support from July 1, 2019, through June 30, 2020, even if the children do not live with the student.
- Other people if they now live with the student and the student or spouse provides more than half of the other people's support and will continue to provide more than half of their support through June 30, 2020.

Number in College: Include below information about any household member who will be enrolled at least half time in a degree, diploma, or certificate program at an eligible postsecondary educational institution any time between July 1, 2019, and June 30, 2020, include the name of the college.

Full Name	Age	Relationship	College	Enrolled at Least Half Time	Supported More Than 50%
		Self	University of Oklahoma		

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Certification and Signatures								
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Each person signing this worksheet certifies that all of the information reported on it is complete and correct. <b>WARNING:</b> If you never the size of the complete and correct to it is complete and correct to it is complete.								
purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.								
Ctudent's Cianature			Doto					
Student's Signature			Date	Date				

Return this form to: The Student Financial Center / 1000 Asp Ave., Room 105 Buchanan Hall / Norman, OK 73019-4078

Date

Spouse's Signature (if applicable)

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