THE UNIVERSITY OF OKLAHOMA STUDENT FINANCIAL CENTER

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2019-2020 DEPENDENT STUDENT PROJECTED INCOME FORM

For parental loss of income beginning in 2019. For parental loss of income which began in 2018 please complete a 2019-2020 Dependent Student Special Circumstances form.

Studen	dent Name: Daytime phone #:	Daytime phone #:					
Social	cial Security #: Sooner ID #:						
1.	1. As of today , has your parent or stepparent lost his or her job for at least 10 weeks in 2019? If "Yes", which parent lost his or her job? What date did the parent lose his/her job?						
2.	2. As of today, has your parent or stepparent been unable to work and earn money in the used disability or natural disaster for at least 10 weeks in 2019? (Natural disaster includes such the fire, flood, etc.) If "Yes", which parent became unable to work or earn income and what is the nature of the disability?	nings as a es	tornado, No				
	What date did the change in earnings begin?						
3.	3. As of today, did your parent or stepparent receive unemployment compensation or some unt benefits (such as court ordered child support or income or benefits from a public or private ager If so, did they lose that benefit for at least 10 weeks in 2019? If "Yes", which parent lost the benefit and what is the source of the untaxed income or benefit?	ncy) in 20 1 es	1 7 ? No				
	What is the date the untaxed income or benefit ceased?						

If your parent(s) answered "Yes" to any of the above questions, complete page 2 and attach documentation as instructed. If your parent(s) answered "No" to the above questions, but their total 2019 income is expected to be less than half of their 2017 income, have your parent(s) attach a letter explaining why and then go to page 2 and attach documentation as instructed.

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Complete the section below as indicated.

Your parent(s) must provide documentation to verify any amount earned since January 1, 2019. Attach a statement from the (former) employer on letterhead, or a copy of the most recent pay stub showing year-to-date earnings. For expected income, provide the best estimate based on the date the form is being completed.

WITHOUT DOCUMENTATION THIS REQUEST WILL BE DENIED.

	Amount Received Since 01/01/2019	Amount Expected Now until 12/31/2019
Father/Stepfather's wages, salaries, tips		
(Any income from work)		
Mother/Stepmother's wages, salaries, tips		
(Any income from work)		

Complete the section below and report parental income received from each source indicated.

Do not leave items blank. Enter zeros in each category for which your parents received or will receive no income.

	Amount Received Since 01/01/2019	Amount Expected Now until 12/31/2019
Severance Pay		
Pensions/Annuities		
Interest/Dividend Income		
Business/Farm Income		
Capital Gains		
Rental Income		
Alimony		
Unemployment Compensation		
Other Taxable Income		
Untaxed Pension/Annuities		
Untaxed Social Security		
Aid to Families with Dependent Children (AFDC)		
Housing Allowance (example: Military or Clergy)		
Child Support		
All Other Non-Taxable Income		

Signatures

certify that al	II informatio	n is true and	accurate t	o the be	est of my	knowledge	and that	I have	provide	d the doci	umentation
requested to	verify the	information	provided (on this	form. I	understand	d I may	be re	quired to	provide	additional
documentation									NFORMA	TION ON T	THIS FORM
MAY INCLUDE	REPAYMEN	NT OF MONE	RECEIVED	D, PLUS	A FINE A	ND/OR IMP	RISONME	NT.			

Student Signature/Date	Parent 1 Signature/Date			
	Parent 2 Signature/Date			

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