

**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 DEPENDENT STUDENT SPECIAL CONDITION FORM

For parental loss of income that began during 2018. For loss of income beginning in 2019 please complete a 2019-2020 Dependent Student Projected Income Form.

Student Name: _____ Daytime phone #: _____

Social Security #: _____ Sooner ID #: _____

Section 1: Loss of taxable income or loss of earner

1. **Since January 1, 2018**, did your (step) parent lose his or her job for at least 10 weeks? Yes____ No____

If "Yes", which parent lost his or her job? _____

What date did the parent lose his/her job? _____

2. **Since January 1, 2018**, was your parent or stepparent unable to work and earn money in the usual way due to a disability or natural disaster for at least 10 weeks? (Natural disaster includes such things as a tornado, fire, flood, etc.) Yes____ No____

If "Yes", which parent became unable to work or earn income and what is the nature of the natural disaster or disability? _____

What date did the change in earnings begin? _____

4. Were your parents married when you completed the 2019-2020 FAFSA, but have since legally separated or divorced?

If "Yes", you MUST attach documentation of legal separation or divorce. Yes____ No____

5. Has one of your parents died since you completed the 2019-2020 FAFSA? Yes____ No____

If your parent answered yes to any of the above questions, attach a signed copy of their 2018 federal income tax return with all schedules and W-2 forms. If your parents were not required to file a 2018 federal tax return and will not file, contact the Student Financial Center. Next, complete the section below as indicated.

List the amount of any other income received during 2018. **Do not leave any item blank** – enter zeros if applicable.

	2018 income
Unemployment Compensation	\$
Housing Allowance (example: Military or Clergy)	\$
Child Support	\$
All Other Non-Taxable Income	\$
Life Insurance proceeds	\$

Continue to Section 2.

Section 2: Loss of untaxed income and other change in circumstances

1. Since January 1, 2018 has your parent or stepparent lost unemployment compensation or some untaxed income or benefits (such as court ordered child support or income or benefits from a public or private agency) which they received in 2017?

Yes____ No____

If "Yes", attach documentation showing the income or benefit ended (such as an order for child support). Attach documentation showing the total amount of the income or benefit received in 2018.

2. Have your parents incurred other non-discretionary expenses (expenses not associated with lifestyle or personal choice)? Examples: Private school tuition for a child with special educational or medical needs, excessive medical expenses not covered by insurance or reimbursed by another source, care for an elderly dependent parent, etc.

Yes____ No____

If you answered "Yes", you should contact the Student Financial Center

Signatures

I certify that all information is true and accurate to the best of my knowledge and that I have provided the documentation requested to verify the information provided on this form. I understand I may be required to provide additional documentation to support this request. **THE PENALTY FOR SUBMISSION OF FRAUDULENT INFORMATION ON THIS FORM MAY INCLUDE REPAYMENT OF MONEY RECEIVED, PLUS A FINE AND/OR IMPRISONMENT.**

Student Signature/Date

Parent 1 Signature/Date

Parent 2 Signature/Date