



**2017-2018
Parent Earnings from Work Under a
Cooperative Education Program**

PCE18

Please Use Black or Blue Ink

OSU Banner ID ("A" plus 8 digits)							
A							

Student Name: _____

The OSU Office of Scholarships and Financial Aid must, by federal regulations, verify the parent information on the 2017-2018 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 Student Aid Report from the FAFSA processor.

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

Calendar Year 2015	Parent(s)	
	Amount	None
Parent(s)' earnings from work under a cooperative education program offered by a college. <i>If the parent was not also a student in 2015, check the "None" box.</i>	\$ _____ /yr	<input type="checkbox"/>

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.**

Parent's Signature *(electronic signature not acceptable)*

Date

Printed Name of Parent Who Signed Above

Street Address

City

State

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)*

Questions?

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