



**2018-2019  
Student/Spouse Child Support Received**

**SSR19**

*Please Use Black or Blue Ink*

Student Name:

| OSU Banner ID<br>("A" plus 8 digits) |  |  |  |  |  |  |  |
|--------------------------------------|--|--|--|--|--|--|--|
| A                                    |  |  |  |  |  |  |  |

The OSU Office of Scholarships and Financial Aid must, by federal regulations, verify the information on the 2018-2019 Free Application for Federal Student Aid (FAFSA). Please provide the information requested below for you (and your spouse, if you are married).

**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, you 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 2016   | Student/Spouse |                          |
|--|----------------|--------------------------|
|  | Amount         | None                     |
| Child support received for any of your children. Don't include foster care or adoption payments. | \$ _____ /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.**

\_\_\_\_\_  
Student's Signature *(electronic signature not acceptable)*

\_\_\_\_\_  
Date

**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](mailto:finaid@okstate.edu)  
Phone: (405) 744-6604  
Web: [financialaid.okstate.edu](http://financialaid.okstate.edu)