SSR27

2026-2027
Student/Contributor (Spouse) Child Support Received

Please Use Black or Blue Ink

Student Legal Name:	OSU Student ID ("A" plus 8 digits)
	A

The OSU Office of Scholarships and Financial Aid must, by federal regulations, verify the information on the 2026-2027 Free Application for Federal Student Aid (FAFSA). Please provide the information requested below for you (and your contributor (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 FAFSA Submission Summary from the FAFSA processor.

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

Last Completed Calendar Year	Student/Spouse	
	Amount	None
List the total amount you (and your contributor (spouse)), if married, received in annual child support for the last complete calendar year.	$_____/yr	☐

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 *(Stylus or ink pen only)* **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
Phone: (405) 744-6604
Web: financialaid.okstate.edu