

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

2024-2025 DEPENDENT STUDENT PROJECTED INCOME FORM

For parental loss of income beginning in 2024. For parental loss of income which began in 2023 please complete a 2024-2025 Dependent Student Special Circumstances form found at the following link.
<https://ou.edu/sfc/financial-aid/special-circumstances>

Student Name: _____ Daytime phone #: _____

Last 4 Social Security #: _____ Sooner ID #: _____

1. **As of today**, has your parent or stepparent lost their job for at least 10 weeks in 2024? Yes ___ No ___
If "Yes", which parent lost their job? _____
What date did the parent lose their job? _____

2. **As of today**, has your parent or stepparent been unable to work and earn money in the usual way due to a disability or natural disaster for at least 10 weeks in 2024? (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? _____

3. **As of today**, did your parent or stepparent receive unemployment compensation or any other untaxed income or benefits (such as court ordered child support **or** income or benefits from a public or private agency) in **2023**?
If so, did they lose that benefit for at least 10 weeks in 2024? Yes ___ No ___
If "Yes", which parent lost the benefit and what is the source of the untaxed income or benefit? _____

What is the date the untaxed income or benefit ceased? _____

If you answered "Yes" to any of the above questions, complete page 2 and attach documentation as instructed.
If you answered "No" to the above questions, but your parent's total 2024 income is expected to be less than half of their 2022 income, have your parent(s) attach a letter explaining why and then go to page 2 and attach documentation as instructed.

Your parent(s) must provide documentation to verify any amount earned since January 1, 2024. 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 01/01/2024	Amount Expected Now until 12/31/2024
Parent 1 wages, salaries, tips (Any income from work)		
Parent 2 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 01/01/2024	Amount Expected Now until 12/31/2024
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

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