

LOW INCOME STATEMENT

Academic Year 2019-2020

Your 2019-2020 Free Application for Federal Student Aid (FAFSA) fails to show financial support. This requires NWOSU to review your income and how support was provided. <u>You must complete and sign</u> <u>this worksheet</u>, attach any required documents, and submit the form to our office. Do not leave any question blank.

A. Student's Information						
Last Name	First Name	M.I.	M.I.		Student's ID Number	
Street Address (include apt. no.)				Date of Birth		
City	State Zi		<u>-</u>	Email Address		
Home Phone Number (include area code)				Alternate or Cell Phone Number		
B. In-Kind Support/Su	pport Paid on	your/your far	nily's b	ehalf listed ye	early amounts for 2017	
Type of Support	Annual A	Amount	Pai	d by whom		
Rent						
Utilities						
Car/Insur/Gas						
Phone						
Health Insurance						
Groceries						
Clothes						
Entertainment						
Child Support Received	l					
C. Explanation of Su	upport/Circum	stance				

D. Certification and Signatures

Each person signing this form certifies that all the information reported on it is complete and correct. Dependent student, the student and one parent must sign and date.	WARNING: if you purposely give false or misleading information on this worksheet, you may be fines, be sentenced to jail, or both.
Student's Signature	Date
Parent's Signature (if applicable)	Date

Submit completed form to:
Office of Financial Assistance
Northwestern Oklahoma State University—Herod Hall 113
709 Oklahoma Blvd
Alva, OK 73717
Phone (580) 327-8542 Fax (580) 327 8177