## THE UNIVERSITY OF OKLAHOMA

### **Health Sciences Center**

865 Reserach Parkway, Room 240 Oklahoma City, Oklahoma 73104 Phone (405) 271–2118 Fax (405) 271–5446

https://financialservices.ouhsc.edu/Departments/Student-Financial-Aid

#### 2024–2025 INDEPENDENT STUDENT PROJECTED INCOME FORM

For independent students (or their spouses) who experienced a loss of earnings that began during 2024. For loss of earnings that began in 2023 please complete a 2023–2024 Independent Student Special Condition form found at the following link. https://financialservices.ouhsc.edu/Departments/Student-Financial-Aid

Student Name: Student ID #:		Daytime phone #:					
Will yo	ur income b	e less in 2024 than in 2023 for any of the following reasons?					
1.	-	rk at least 35 hours per week for at least 30 weeks in 2023 but are not working now?					
	If "Yes", wh	at is the date you stopped working?					
2.	Did your sp	pouse earn money in 2023 but has lost their job for at least 10 weeks in 2024?	Yes	No			
	If yes, what	t is the date your spouse lost their job?					
3.	disaster fo YesNo	s of today, have you or your spouse been unable to work and earn money in the usual way due to a disability or natural isaster for at least 10 weeks in 2024? (Natural disaster includes such things as a tornado, fire, flood, etc.) esNo "Yes", what is the nature of the natural disaster or disability?					
	What date	did the change in earnings begin?					
4.	as court or	y, did you or your spouse receive unemployment compensation or some untaxed inc dered child support <b>OR</b> income or benefits from a public or private agency) in 2023? If at least 10 weeks in 2024?		hey lost that			
	If "Yes", wh	at is the source of the untaxed income or benefit?					
	What is the	e date the untaxed income or benefit ceased?					

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

**GO TO NEXT PAGE** 

Complete the section below as indicated.

You must provide documentation to verify any amount earned since January 1, 2024. Attach a statement from the (former) employer on letterhead or copy of your 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 NowUntil 12/31/2024
Student's wages, salaries, tips (any income from work)		
Spouse's wages, salaries, tips (any income from work)		

Complete the section belowand report your and your spouse's income received from each source indicated. **Do not leave items blank**. Enter zeros in each category for which you/your spouse received or will receive no income.

Sources of Income	Amount Received Since 01/01/2024	Amount Expected Nowuntil 12/31/2024

# Signatures

Student Signature	Date	Spouse Signature	Date
		<u> </u>	
OR IMPRISONMENT.			
SUBMISSION OF FRAUDULENT INFO	RMATION ON THIS FORN	MMAY INCLUDE REPAYMENT OF MONE	Y RECEIVED, PLUS A FINE AND,
understand I may be required t	to provide additional	documentation to support this re	equest. THE PENALTY FOR
		on requested to verify the informati	•
		ify that all information is true and	
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By submitting this form I am requesting any additional funds for which I may qualify. If I am offered a loan I understand I