

**2016-2017****Student/Spouse Taxable Earnings from
Need-Based Employment****SBE17***Please Use Black or Blue Ink***OSU Banner ID**
("A" plus 8 digits)**Student Name:****A**

The OSU Office of Scholarships and Financial Aid must, by federal regulations, verify the information on the 2016-2017 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 2015	Student/Spouse	
	Amount	None
Taxable earnings from need-based employment programs , such as Federal Work-Study and need-based employment portions of fellowships and assistantships.	\$ _____/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**Please return to:**

Office of Scholarships and Financial Aid
119 Student Union, Stillwater, OK 74078-5061
Email: finaid@okstate.edu
Phone: (405) 744-6604
<http://financialaid.okstate.edu>
FAX#: (405) 744-6438
(If you fax this form, please don't mail it)