



REPORTING ADDITIONAL SOURCES OF AID

Select application year: 2016-2017 () 2017-2018 ()

Oregon State University needs information from you to process your Financial Aid Award.

Student Name _____

Student ID# _____

I agree to report to the OSU Office of Financial Aid and Scholarships any additional assistance I may receive at any time throughout the school year. This includes, but is not limited to:

- All scholarships
- Stipends
- Fellowships
- GRA or GTA positions
- Room & Board allowances or subsidies
- Vocational Rehabilitation
- Staff Fee Rates
- Tuition Waiver/Assistance

Scholarships (list total amount to be received for the academic year)

Name: _____ Amount: _____
 Name: _____ Amount: _____
 Name: _____ Amount: _____
 Name: _____ Amount: _____
 Name: _____ Amount: _____

Please attach additional pages if needed

Other

(Specify type and amount)

<input type="checkbox"/> Vocational Rehabilitation	\$ _____	<input type="checkbox"/> Tribal Assistance	\$ _____
<input type="checkbox"/> Tuition Assistance	\$ _____	<input type="checkbox"/> GTA/GRA Tuition Assistance	\$ _____
<input type="checkbox"/> Employer Assistance	\$ _____	<input type="checkbox"/> Staff Fee Rates	\$ _____
<input type="checkbox"/> Resident Assistance/Room Waiver	\$ _____	<input type="checkbox"/> Other _____	\$ _____

I understand that any additional assistance indicated above may result in a revision of my aid offer and/or may require repayment of Financial Aid already received.

All the information included is true and complete to the best of my knowledge. If asked by an authorized official, I agree to give proof of the information I have submitted.

Student Signature _____

Date _____