



FINANCIAL DISCLOSURE FORM

Instructions:

Print legibly (use ink). Do not leave any space blank. Provide all information requested and copies of all items as proof of debt or income, including all sources of income. **If verification is not received, the request will not be reviewed.** Failure to disclose all applicable documentation (e.g., income) will result in denial of your request without further consideration.

Name: _____
(First, Middle, Last)

SSN: _____ Date of Birth: _____ Marital Status: _____

Mailing Address:

Street: _____

City: _____ State: _____ Zip Code: _____ How Long? _____ / _____
(Yrs.) (Mos.)

Telephone: (_____) _____ - _____ E-mail Address: _____

Number of dependents **living with you:** _____ Ages: _____

Borrower Occupation/Job Title: _____

Monthly Income: _____

Employer Name and Address: _____

Spouse Employed: _____ If no, state reason: _____
(Yes or No)

List your spouse's most recent job search: _____
(Company name & phone number)

Spouse's Monthly Income: _____ Occupation/Job Title: _____

Employer Phone Number: (_____) _____ - _____ Fax Number: (_____) _____ - _____

I can pay \$_____ per month on this loan. (Please enclose this amount as a good faith payment to avoid further collection activity.)

Signature: _____ Date: _____

Upon completion, please return to the following address:

Oklahoma Guaranteed Student Loan Program ● P.O. Box 3000 ● Oklahoma City, OK 73101-3000

Phone: 800.777.3394 (toll-free) ● Fax: 405.234.4482

**IF YOU DO NOT ENCLOSE COPIES OF ALL APPLICABLE ITEMS,
YOUR REQUEST MAY BE DENIED. CHECKLIST IS PROVIDED ON BACK OF PAGE.**

