



WAGE WITHHOLDING REDUCTION REQUEST

Request to Reduce Withholding Order to Less than 15% of Net Pay

Instructions:

Print legibly (use ink). Do not leave any space blank. Provide all information requested and copies of all items as proof of debt (items for which you are actually making payments) or income, including alimony and child support. Include all sources of income. **If verification is not received, the request will not be reviewed.** By signing this document, you agree and give permission to have all information verified.

Failure to disclose all applicable documentation (e.g., income) will result in denial of your request without further consideration. A documentation checklist is provided on the back of this form.

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)

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

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

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 YOUR DOCUMENTS OR IF YOUR DOCUMENTS ARE ALTERED OR FALSIFIED IN ANYWAY, YOUR REQUEST WILL BE DENIED.



BORROWER CHECKLIST
DID YOU REMEMBER TO ENCLOSE...

1. Current pay stub(s) for one month's **GROSS** income? yes ___ no ___
Monthly Amount _____ Additional Sources of Income: Monthly Amount _____
2. Copy of rental agreement or mortgage statement? yes ___ no ___
Monthly Amount _____
3. Court-ordered child support yes ___ no ___
Monthly Amount _____
4. Copy of child care statement, receipt or letter from child care provider? yes ___ no ___
Monthly Amount _____
5. Copy of current utility bills (e.g., gas, electric, sewage and water)? yes ___ no ___
Monthly Amount _____ Monthly Amount _____ Monthly Amount _____
6. Luxury item statements (e.g., credit cards, cable, internet)? yes ___ no ___
Monthly Amount _____
7. Current phone bill? (\$35 credit only) yes ___ no ___
Monthly Amount _____
8. Spouse's gross monthly income statement/stub(s) for one month? (if applicable) yes ___ no ___
Monthly Amount _____
9. Copy of car payment statement? yes ___ no ___
Monthly Amount _____
10. Copy of car insurance statement? yes ___ no ___
Monthly Amount _____
11. Copy of loan statements or other bills for which payments are currently being made? yes ___ no ___
Monthly Amount _____
12. Other (Use this space to provide an estimate of your monthly grocery bill.)

Enclose copies of your entire billing statement and indicate on the statement what the debt is for (e.g. This is my car payment, etc.). Do not enclose copies of your cancelled checks. If you are remitting statements that are not in your name, you must explain and provide a written explanation from the person whose name appears on the statements.

Medical and tax bills/repayment agreements must indicate the amount of the monthly payment.