

Self-Disclosure of **Student Financial Assistance**

This form must be used in conjunction with OHFA's Student Financial Aid Verification form (PC-E12)

Applicant/Tenant:			Unit #:
			ped in IRC §170(b)(1)(A)(ii) or are pursuing a full-time course ational organization described in IRC §170(b)(1)(A)(ii) or of a
For each of the following types of student financial assista	ance, please c	heck Yes	or No .
Note: If you are unsure about the type and/or amount of fir	nancial assista	ınce, chec	k with the financial aid office at your school.
Amounts Received Under Section 479B Of The	e Higher Ed	ucation	Act (HEA) Of 1965
	cial assistance deral funds. T	are exclu he types o	ided in determining eligibility for benefits made available of financial assistance listed below are considered 479B
Federal Pell Grants	o Yes	O No	Amount: \$
Teach Grants	o Yes	O No	Amount: \$
Federal Work Study Programs	o Yes	o No	Amount: \$
Federal Perkins Loans	o Yes	O No	Amount: \$
Student financial assistance received under the Bureau of Indian Education	o Yes	o No	Amount: \$
Higher Education Tribal Grant	o Yes	o No	Amount: \$
Tribally Controlled Colleges or Universities Grant Program	o Yes	o No	Amount: \$
Employment training program under section 134 of the Workforce Innovation and Opportunity Act (WIOA)	o Yes	O No	Amount: \$
Other amounts awarded under Section 479B	o Yes	o No	Amount: \$
			<i>Total</i> : \$
Amounts Received as Other Student Financia Other student financial assistance includes grants or scho		_	or merit-based) received from the following sources:
The Federal government	○ Yes	O No	Amount: \$
A state (including U.S. territories), Tribe, or local government	O Yes	O No	Amount: \$
A private foundation registered as a nonprofit under 26 U.S.C. 501(c)(3)	o Yes	o No	Amount: \$
A business entity (such as a corporation, general partnership, limited liability company, limited partnership, joint venture, business trust, public benefit corporation, or nonprofit entity)	o Yes	O No	Amount: \$
An institution of higher education	o Yes	o No	Amount: \$
Military Assistance (state or federal, e.g. G.I. Bill)	o Yes	o No	Amount: \$
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Other Monetary Contributions				
Financial support provided to the student in the form of a fee for services performed (e.g., a work study or teaching fellowship) that is not excluded from eligibility determination in accordance with section 479B of the Higher Education Act HEA)	o Yes	O No	Amount: \$	
Gifts, including gifts from family or friends	O Yes	O No	Amount: \$	
			<i>Total</i> : \$	
Covered Costs For each of the covered costs associated with attendance	e, identify how	the cost w	vill be covered.	
Tuition				
Books				
Supplies (including supplies and equipment to support students with learning disabilities or other disabilities)				
Room				
Board				
Fees required and charged to a student by an institution of higher education —				
Signature of Applicant/Tenant		D	ate	
Printed Name of Applicant/Tenant				
Signature of Owner/Management Agent		D	ate	
Printed Name of Owner/Management Agent				

Under penalties of perjury, I certify that the information provided herein is true and accurate to the best of my knowledge. The undersigned further understands that providing false representation herein constitutes fraud.

