

# 2026-27 Student Low Income Statement

Your Free Application for Federal Student Aid (FAFSA) shows that you reported unusually low income for the year 2024.  
Please complete this form to explain your circumstances.

Oregon Tech ID #: \_\_\_\_\_ Student Name: \_\_\_\_\_ Preferred Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Oregon Tech Email: \_\_\_\_\_

Please explain how you were able to survive with little or no income in 2024:

---



---



---



---



---



---

Please assign dollar amounts for each living expense below and indicate how these bills were paid. If the living expense was paid on your behalf, please explain how and by whom.

Monthly Expense	Cost per Month	How was the expense paid?
<b>Example - Rent</b> <i>You lived with a roommate in an apartment with \$700/month rent, which your roommate paid, your share of the rent would be \$350.</i>	\$350	Roommate
Rent/Mortgage		
Food		
Utilities <i>(electricity, heat, telephone, cable TV)</i>		
Medical Expenses <i>(insurance, prescriptions)</i>		
Transportation <i>(car payment, insurance, gas, bus pass)</i>		
Clothing & Essentials		
Daycare		
<b>Total</b>		

I certify the above information is correct.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## Financial Aid Office



3201 Campus Drive, Klamath Falls, OR 97601  
541.885.1280 (Phone) ○ 541.885.1024 (Fax)  
www.oit.edu/faid ○ dollars@oit.edu

*Our office hours are:*  
8:00 a.m. to 5:00 p.m.  
Monday-Friday