OKLAHOMA STATE REGENTS FOR HIGHER EDUCATION
OKLAHOMA TUITION AID GRANT PROGRAM
AWARD CLAIM FORM
EXCEL SPREADSHEET LAYOUT AND INSTRUCTIONS
2024-2025

Note: Additional Information Regarding Reporting Requirements Is Presented Following This Table.

Column	Column Name	Allowable Values	Instructions
A	SSN	Numbers	♦ 9-digit SSN, **including lead zeroes if applicable** ♦ Do not enter dashes
B	Last Name	Alphabetic Name	♦ Alpha Characters Only
C	First Name	Alphabetic Name	♦ Alpha Characters Only
D	Middle Initial	Alphabetic Name	♦ Alpha Characters Only
E	ISIR Transaction Number	01…..99	♦ ISIR transaction number that corresponds with the data used to determine the student's 2024-2025 financial aid eligibility ♦ Use a leading zero if the transaction number is less than 10
F	SAI	Number	♦ **SAI (Student Aid Index)** used to determine the student's 2024-2025 financial aid eligibility ♦ Up to 6 digits can be used.
G	Enrollment Status	FT = Full-time PT = At least half-time LT = Less than half-time	♦ **Update or enter student's current enrollment status for this disbursement**
H	Payment Period Disbursement Amount	Number Whole dollar amount MUST BE FILLED IN. **Cannot be less than $100.**	♦ Fill in the amount to be awarded to the student for the payment period. ♦ Whole dollar amounts only. ♦ **Must be at least $100 per payment period**
J	Indicator for Resident Due to Military Status	**Blank for most students** Put a "Y" in this field when you have added an eligible military student that qualifies for in-state status and state financial aid and did not put Oklahoma on his/her FAFSA as the "state of legal residence".	♦ **Leave blank unless the student qualifies for in-state status and financial aid AND did not list Oklahoma as the "state of legal residence" on the FAFSA. These students must be enrolled and meet all of the OTAG eligibility criteria at the time the claim is submitted and when the funds are disbursed.**

Column	Column Name	Allowable Values	Instructions
K	Student ID	**Text** Enter the school-assigned student identifier. Up to nine characters and/or numbers are allowed.	**Optiona**l ♦ Institutions must provide the school-assigned student identifier in order for the value to be displayed on the related disbursement roster.

Award Claim Form Instructions for Completion (Excel)

To request OTAG funds for students at your institution, the students' names and information must be submitted to OTAG on an Award Claim Form.

1. Begin with blank OTAG Award Claim Form Template. Blank ACF templates are available from OSRHE Financial Aid Resource for Institutions (https://okhighered.org/admin-fac/finaidresources/otag/).

2. Save and rename file on your computer.

When you save the file to your computer, please:

♦ Rename the file using the format **xxxMMDDYYYYacfi.xlsx** where acf**i** represents "inbound" (to be sent from an institution to OTAG). (The xxx should be initials for your institution. You can use the ones used in the past or make up your own. Please be consistent.)

♦ Adhering to this specific naming format will assist OTAG staff and will be appreciated.

3. Enter Student Data.

By including a student on an award claim form submitted to OTAG, the institution certifies that the student meets **all** eligibility requirements to receive an OTAG award and requests immediate disbursement of funds for that student.

♦ **Allowable Values:** Allowable values for each column must be strictly adhered to. If a column is updated with a value not specified in the Allowable Values table for that column, OTAG's automated processing system will not be able to read it correctly, and the institution will be asked to submit a corrected report.

♦ **Transaction Number (Column E):** Institutions may be asked to assist OTAG staff in resolving ISIR transaction number and SAI mismatches if found when an inbound Award Claim Form is processed with the current OTAG database.

♦ **SAI (Student Aid Index) (Column F): SAI** used to determine the student's 2024-2025 financial aid eligibility.

♦ **Enrollment Status (Column G):** Please enter the current enrollment status in Column G. **Please enter the payment period enrollment status for this disbursement.** Full-time, part-time and less than half-time statuses are defined in accordance with the current definition for full-time, half-time and less than half-time enrollment status for federal Title IV student financial aid eligibility.

  o Funds will be issued according to your confirmation of the student's FT, PT or LT status. **If the amount you claim exceeds the 75% of tuition and fees as reported to the OSRHE, we will not process the claim and will notify you for more information.**

  o No values other than FT, PT or LT are allowed in this column, and reports containing any other values in this column will not be accepted for processing. It is important that institutions accurately report each student's FT, PT or LT status **EVEN IF YOUR STUDENTS RECEIVE THE SAME**

AWARD AMOUNT FOR FT, PT or LT STATUS. OTAG is required to track enrollment status. If the request for funds for a student is for an additional amount for the same payment period, the enrollment status that is accurate for the student at the time of the additional request must be entered in this field.

♦ **Payment Period Disbursement Amount (Column H):** Enter the amount to be paid to this student during the payment period for the current claim.

♦ **Award due to Military Status (Column J):** An entry in this column (Y) indicates that the student qualifies for in-state status and financial aid as a full-time active duty member of the armed forces or dependent of a full-time active duty member of the armed forces. Legislation now extends in-state status to certain veterans, spouses and dependent children as well. ROTC participants are also now eligible for in-state status. This entry is necessary only for students that have indicated a "state of legal residence" other than Oklahoma on the FAFSA. **The student must meet all other OTAG eligibility criteria.**

♦ **Student ID (Column K):** Optional. If institutions wish to list the school-assigned student identifier on the related disbursement roster, these identifiers must be entered into this column by the school. OTAG will not maintain or track this number after its appearance on the disbursement report. This column may be left blank.

4. Complete Heading.

♦ **Heading**: The spreadsheet heading must be filled out with the following information:

  o Institution Name
  o Institution 6-digit Title IV code number
  o Semester and Award Year (Fall, Spring or Summer and 2023-2024) Name and Title of the <u>Authorized Institutional Representative</u> completing the Award Claim Form and responsible for the accuracy of the award eligibility data
  o Date the Award Claim Form was completed

Award Claim Forms without this information completed will <u>not</u> be accepted.

♦ **Authorized Institutional Representative**: The Award Claim Form must be submitted by an authorized institutional representative for the OTAG program as designated by the president or chief executive officer of the institution.

♦ **Multiple Award Claim Forms** can be submitted in each semester.

5. Upload Report to O-SAFE (OSRHE Secure Access File Exchange). O-SAFE instructions can be requested by e-mail at reports@otag.org .

If you have questions concerning the Award Claim Form Excel Spreadsheet or for general OTAG inquires, contact the OTAG office at 405.225.9456 or toll-free at 800.858.1840 or send e-mail to reports@otag.org