

18CSUP Child Support Paid Verification Form Financial Aid Office

Student Name:			Student ID#: A			
Address:						
Preferred Contact Phone #:			Date of Birth://			
Instructions:						
Your 2017-2018 FAFSA Please complete and subschild support, the name child support was paid, whild in 2015, and if the paid for children in your additional documentations.	bmit this form to the Fix of the person to whom the age of each child, the child now lives with the household size on your on.	nancial Aid Office. Ind the child support was he total annual amoun e person who paid chi	licate the paid, the t of child ld suppo	e name of the po e name of each o d support that v ort. <u>Do not repo</u>	erson who paid the child for whom vas paid for each rt child support	
Section I: Child Supp						
Name of Person Who Paid Child Support	Name of Person to Whom Child Support was Paid	Name of Child for Whom Child Support was Paid	Age of Child	Amount of Child Support Paid in 2015	Does Child Listed Currently Live With Person in First Box?	
John Smith (example)	Jane Doe	Jennifer Doe	9	\$6,000.00	No	
Section II: Certification I hereby certify that all to the intentionally provided sentenced to jail or both information.	the information contain d any false statements o	or fraudulent document	tation. I	understand that	I may be fined,	
Student's Signature:				Date:		
Parent's / Spouse's Signature:				Date:		