CHILD SUPPORT PAID VERIFICATION FORM  
2016 - 2017

Student’s Name__________________  Student’s ID Number__________________

If the student was required to provide parental information on the FAFSA, answer each question below as it applies to the student and the student’s parent(s) whose information is on the FAFSA.

If the student was not required to provide parental information on the FAFSA, answer each question below as it applies to the student (and the student’s spouse, if married).

If the student and/or spouse (if applicable) or the student and/or one or both of the parents included in the household paid child support in 2015, provide in the space below the names of the person(s) who paid the child support, the name(s) of the person(s) to whom the child support was paid, the name(s) and ages of the child(ren) for whom the child support was paid, and the total annual amount of child support that was paid in 2015 for each child.

If more space is needed, provide a separate page that includes the student’s name and ID number at the top.

<table>
<thead>
<tr>
<th>Name of Person Who Paid Child Support</th>
<th>Name of Person to Whom Child Support Was Paid</th>
<th>Name and Age of Child for Whom Child Support Was Paid</th>
<th>Amount of Child Support Paid in 2015 for Each Child</th>
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Total Amount of Child Support Paid $ __________________________

Note: If we have reason to believe that the information regarding child support paid is not accurate, we may require one or more of the additional documentation listed below.

- A copy of the separation agreement or divorce decree that shows the amount of child support to be provided;
- A statement from the individual receiving the child support certifying the amount of child support received; or
- Copies of the child support payment checks or money order receipts.

If no one in the household paid child support during the 2014 calendar year please read and initial the statement below:

_______ I certify that no one included in the household on my 16/17 FAFSA paid child support in 2015.

Each person signing below certifies that all the information reported is complete and correct. The student and one parent whose information was reported on the FAFSA must sign and date.

________________________________  ____________________________________
Print Student’s Name  Student’s ID Number

________________________________  ________________________________
Student’s Signature  Date

________________________________  ________________________________
Parent’s or Spouse’s Signature (If applicable)  Date