



2016-2017 Confirmation of Child Support Paid by Student/Spouse

Last Name	First Name	Middle Name	Student VIP ID
Student's Email Address	Student's Telephone Number		Date of Birth

We have received your 2016-2017 Free Application for Federal Student Aid (FAFSA). We are required to verify any child support paid by you or your spouse. Please complete the items below for each person to whom child support was paid. Once completed, please sign and return this form to the address or fax number provided at the top of this form.

Name of Person Who Paid Child Support	Name of Person to Whom Child Support was Paid	Name of Child for Whom Support Was Paid	Child's Age	Annual Amount Paid in 2015
				\$
				\$
				\$
				\$
				\$

-OR-

No child support was paid by a student or spouse.

Note: If we have reason to believe that the information regarding child support paid is inaccurate, we may require additional information, such as:

- Copies of the child support payment checks, money order receipts, or similar records of electronic payments having been made.

By signing this document, I certify that all the information reported on it is true and accurate. If I purposely give false or misleading information on this document, it will be cause for denial or repayment of financial aid and I may also be fined, sentenced to jail, or both.

Student's Signature

Date

Spouse's Signature (optional)

Date