

CHILD SUPPORT RECEIVED

Complete and submit this form to verify the amount of child support that you (and/or your parents if dependent for federal student aid purposes) **received** in 2019.

SECTION A. Student Information

Student's name: _____ Phone: _____

Address: _____

SECTION B. Child Support Received

YES **NO** Did you, your spouse (if married) or parents (if dependent) **receive** any child support for anyone in your household in 2019?

List the actual amount of any child support received in 2019 for the children in your household. **Do not include** foster care payments, adoption payments or *any amount that was court-ordered but not actually paid.*

Name of adult who received the support	Name of child for whom support was received	Amount of child support received 2019 (entire year)

SECTION C. Certification

I certify that all information provided in this document is true, complete and accurate. I understand that if I purposely give false or misleading information I may be fined, sentenced to jail or both.

Student signature: _____ Date: _____

Parent signature: _____ Date: _____

(Parent signature required if student is dependent for federal student aid purposes.)