2018-2019 CHILD SUPPORT RECEIVED

VERIFICATION WORKSHEET

Name: ________________________________________        CWID: ____________________________________
(Please Print Clearly)

On your Free Application for Federal Student Aid (FAFSA) or your Verification Worksheet, you indicated you, your spouse
(if married) or your parent(s), (if dependent) received child support during the year 2016. As part of the verification
process, you must confirm the amount of child support received and who the child support was received for and proof of
support received. Please complete the information below and provide proof the child support. Please be aware a court
order is not acceptable documentation it must be either a statement from the domestic relations office cancelled checks,
bank statement etc. Once completed, please return all information to the Financial Aid Office.

SECTION A: Please Check the Box that Applies:

☐ I (or my spouse if married) received child support during the year 2016.
☐ My parent(s) received child support during the year 2016. (Dependent Students Only)
☐ Neither I or my parent(s) received child support during the year 2016.

SECTION B: If child support was received during the year 2016 please complete the section below.

Name of person who received child support during the year 2016: ______________________________________

Relationship to the Student (circle one): Self Spouse Mother/Step Mother Father/Step Father

Name of the child or children for whom you received child support: ______________________________________

Total Amount of Child Support received during the year 2016: $____________________________________

SECTION C: Signatures

By signing this worksheet, we certify that all the information is complete and correct. Warning: If you purposely give
false or misleading information on this worksheet, you may be fined, sentenced to jail, or both.

______________________________________________  _________________________________________________
Print Student Name                                  Student Signature          Date

______________________________________________  _________________________________________________
Print Parent Name (If Dependent Student)                  Parent Signature (If Dependent Student)              Date