2015 - 2016
Child Support Paid Worksheet

Date: ___________________________  Student ID: ___________________________
Last Name: ______________________  First Name: ___________________________
Phone Number: __________________  Email Address: ________________________

Please update your account in SiS if the email address and phone number listed above is different.

List the child support paid during the calendar year 2014. **DO NOT LEAVE ANY BLANKS.**

**Dependent Students:** Complete this form if one or both of your parents **paid** child support in 2014.

**Independent Students:** Complete this form if you or your spouse (if married) **paid** child support in 2014.

Please note that the child for whom the support was paid should not be included in the household size on the FAFSA.

<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 paid in 2014</th>
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*If you need additional space, please write in the space below or on the back of this form

**Note:** If we have reason to believe the information regarding child support paid is not accurate, we may require additional documentation.

**CERTIFICATION**

By signing this form, I certify all information reported on this form and within the enclosed documentation is complete and correct. I understand that providing false or misleading information may result in a fine, a prison sentence, or both, according to the Higher Education Act of 1965, as amended, Section 490(a). Any false or misleading information is subject to cancellation of all financial assistance.

__________________________________________  __________________________
Student Signature                             Date

__________________________________________  __________________________
Parent Signature **(Required for Dependent Students)**  Date