# Student Financial Services
## 2014-2015
## Verification of Child Support Paid

**\*\*\* Required for Verification by the US Department of Education\*\*\***

**Please complete in black ink.**

**Name:** _____ **Student ID #:**_____

> Your 2014–2015 Free Application for Federal Student Aid (FAFSA) was selected for review in a process called verification. The law says that before awarding Federal Student Aid, we must ask you to confirm the information you reported on your FAFSA. To verify that you provided correct information, Forsyth Tech will compare your FAFSA with the information on this Statement and with any other required documents. If there are differences, your FAFSA information may need to be corrected. You (and your spouse, if married, or parents' if you are considered dependent for financial aid purposes) must complete and sign this form, attach any required documents, and submit the form and other required documents to the Office of Student Financial Services. NOTE: Forsyth Tech may ask for additional information if we have any reason to believe that the information reported here is not accurate.

**A. Statement of Child Support Paid**

You indicated on your Free Application for Federal Student Aid (FAFSA) that someone in your household (you, your spouse, or your parent) paid child support at some time during the 2013 calendar year. This refers to child support paid because of divorce, separation, or as the result of a legal requirement.

Please provide the name of the person(s) below who paid child support during the 2013 calendar year, the name(s) to whom the child support was paid, the name(s) of the child/children it was paid for, and the total yearly dollar amount paid. **Do not include child support paid for children in your (or your parents') household, as reported on your FAFSA.**

| Full Name of Person Who Paid Child Support | Name of Person to Whom Child Support Was Paid | Full Name of Child for Whom Support Was Paid | Total Amount Paid for 2013 |
|---|---|---|---|
| | | | $ |
| | | | $ |
| | | | $ |
| | | | $ |
| | | | $ |
| | | | $ |

**B. Signature** I (we) certify that all the information reported on this Statement is complete and correct.

Student's Signature: _____ Date: _____

Parent's Signature: _____ Date: _____
(Required for Dependent Student)