**Purpose of Form**
Generally, the Child Support Paid Form is requested because you reported that a parent in your household paid child support in 2015 on the Free Application for Federal Student Aid (FAFSA), CSS PROFILE, or University Financial Aid Application. This form is used to confirm the amount of child support paid by a parent or step-parent in 2015. For independent students, a parent may be the student or if married, the student’s spouse.

**General Instructions**
The name of the individual who paid child support in 2015 should be listed on the line at the top of the form. This person will be the “payer” for the purposes of this form and will also be required to sign the form. You should also indicate the relationship of the payer to the student.

On the table, the payer should list the child(ren) for whom he/she paid child support in 2015, as well as the other required information for each child. You should only report actual support paid and not the amount that may have been required. Do not report payments for post-secondary education.

If both parents in the household paid child support in 2015, please complete a separate form for each parent.

**EXAMPLE**

<table>
<thead>
<tr>
<th>Name of child for whom support was paid</th>
<th>Child’s Date of Birth (MM/DD/YYYY)</th>
<th>Amount paid in 2015</th>
<th>Name of person to whom support was paid in 2015</th>
<th>Anticipated amount to be paid in 2016</th>
<th>Date support ends</th>
</tr>
</thead>
<tbody>
<tr>
<td>Steven Johnson</td>
<td>06/01/1999</td>
<td>$2500</td>
<td>Mark Johnson</td>
<td>$1250</td>
<td>06/2017</td>
</tr>
<tr>
<td>Stephanie Johnson</td>
<td>06/15/2000</td>
<td>$2500</td>
<td>Mark Johnson</td>
<td>$2500</td>
<td>06/2018</td>
</tr>
</tbody>
</table>

Student Financial Services may request third-party documentation to confirm the values you report on your Child Support Paid Form. Should you or a parent submit a form with incorrect information, you must also submit third-party documentation to confirm the correct values. Adjustments to a financial aid award as a result of submitting documentation to correct a Child Support Paid Form are neither guaranteed nor immediate.

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

- A copy of the separation agreement or divorce decree that shows the amount of child support to be provided;
- A statement from the individual receiving the child support certifying the amount of child support received; or
- Copies of the child support payment checks or money order receipts.

Forms received without the appropriate signature(s) or with missing information or missing pages are considered incomplete and must be resubmitted. This will delay the evaluation of your financial aid eligibility and the awarding of your financial aid.
CSUP

Child Support Paid Form
2016-2017

Student’s University ID: □□□□ □□□□□□ or SIS ID: □□□□□□□

Student’s Full Name:
(LEGAL NAME - PRINT) first middle last

Name of person who paid child support (Payer):
(LEGAL NAME - PRINT) first middle last

Relationship of payer to student:

<table>
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<tr>
<th>Name of child for whom support was paid</th>
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<th>Amount paid in 2015</th>
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</table>


STUDENT CERTIFICATION STATEMENT: I certify that all the information reported to qualify for federal aid is complete and correct to my knowledge. If additional documentation is required, I will submit those documents in a timely manner. I understand that if I purposely give false or misleading information, I may be fined, sentenced to jail, or both and my financial aid may be terminated.

STUDENT SIGNATURE_________________________________________ Date__________

PAYER CERTIFICATION STATEMENT: I certify that I am the person that paid child support in 2015 to the person identified in the table above and that all information reported is complete and correct to my knowledge. I understand that if I purposely give false or misleading information, I may be fined, sentenced to jail, or both.

PAYER SIGNATURE_________________________________________ Date__________