SCHOOL OF THE ARTS

Dependent 2017-2018 Child Support Paid Worksheet Federal Student Aid Programs

	A. Studer	nt Information	
Last name	First name	M.I.	E-Z Arts ID #
Address (include apt. no.)			Date of birth
City	State	ZIP code	Phone number (include area code)
B. Child Support Paid Inform	nation		
below detailing the name of	paid child support to some the person who paid the c	eone outside the household hild support, the name of t	in 2015. Complete the chart he person to whom the support punt of child support paid in
Name of Person WHO PAID Child Support	Name of Person TO whom Child Support was paid	Name of Child FOR whor Child Support was paid	Amount of Child Support Paid in 2015
 A copy of the separa provided; A statement from the received; or 	ation, such as: tion agreement or divorce	decree that shows the amo	rt paid is not accurate, we may ount of child support to be amount of the child support
C. Certification and Signatu	11 1 1	, ,	
	certifies that all information as reported on the FAFSA	must sign and date this fo	
Name of person who PAID child support (please Print)		Signature of person who Pa	AID child support Date
Signature of Student		Date	
Signature of Parent		 Date	