

2015-2016 Independent Child Support Paid Verification

UNTF Assigned ID:

SSN (last 4 digits only):

SECTION A: STUDENT INFORMATION

Name:

Your application has been selected for Verification. We are required by federal law (34 CFR, Part 668) to compare the information from your Free Application for Federal Student Aid (FAFSA) with the information provided on this form. Fill out this form if you (and, if married, your spouse) paid child support during the calendar year 2016.			
SUBMITTING THIS FORM ✓ We will update your FAFSA, if needed, based on the information provided on this form. ✓ We cannot continue processing your financial aid until all required financial aid documents have been submitted. ✓ All required documents must be submitted to our office <i>at least</i> two weeks before the end of the term.			
SECTION B: CHILD SUPPORT PAID			
Did you (or, if married, your spouse) pay child support because of divorce or separation or as a result of a legal requirement during the calendar year 2013? Do not include support for children included in your household on the FAFSA. YES. Complete the section below. NO.			
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Name of child	Relation to Student	Name of person support was paid to	Amount paid
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GEORGAN C. GERTENICA TION			
SECTION C: CERTIFICATION I certify that all the information contained on this form is complete and correct and that there is no forgery of signature(s). I understand that I must sign and return this form for my financial aid to be processed. Electronic signatures are not accepted.			
Student Signature D	ate Spous	e Signature (if married)	Date

X