



Student Financial Assistance Office
 G1 Parker Hall 300 W. 13th Street
 Rolla, MO 65409
 Phone (573) 341-4282 or 1-800-522-0938
 Fax (573) 341-4274 Email: sfa@mst.edu

Student Name (Last, First)	Student ID

2017-2018 Child Support Paid Verification

The information requested on this form is needed to process your application for financial aid for the 2017-2018 academic year. On the 2017-2018 Free Application for Federal Student Aid (FAFSA), you indicated that you, your spouse, or your parent, paid child support in calendar year 2015. You have been selected to verify these amounts paid in 2015.

DO NOT include support for children in your household as reported on the Verification Worksheet.

If no child support was paid by you, your spouse, or your parent in 2015, please check here

Sign and submit this form to the financial assistance office. A correction will be made to your FAFSA accordingly.

STUDENT (and/or SPOUSE, if applicable) WHO PAID CHILD SUPPORT		
NAME OF PERSON WHO MADE THE CHILD SUPPORT PAYMENT	NAME OF PERSON TO WHOM CHILD SUPPORT WAS PAID	
		\$
NAME OF CHILD 1 FOR WHOM CHILD SUPPORT WAS PAID	AGE OF CHILD 1 FOR WHOM CHILD SUPPORT WAS PAID	AMOUNT PAID
		\$
NAME OF CHILD 2 FOR WHOM CHILD SUPPORT WAS PAID	AGE OF CHILD 2 FOR WHOM CHILD SUPPORT WAS PAID	AMOUNT PAID
NOTE: if you need additional space, please write on the back of this form		
PARENT LISTED ON FAFSA WHO PAID CHILD SUPPORT		
NAME OF PERSON WHO MADE THE CHILD SUPPORT PAYMENT	NAME OF PERSON TO WHOM CHILD SUPPORT WAS PAID	
		\$
NAME OF CHILD 1 FOR WHOM CHILD SUPPORT WAS PAID	AGE OF CHILD 1 FOR WHOM CHILD SUPPORT WAS PAID	AMOUNT PAID
		\$
NAME OF CHILD 2 FOR WHOM CHILD SUPPORT WAS PAID	AGE OF CHILD 2 FOR WHOM CHILD SUPPORT WAS PAID	AMOUNT PAID
NOTE: if you need additional space, please write on the back of this form		

STOP: Did you fully complete this form? We will return any incomplete/unsigned forms for correction.

Manually sign this Worksheet. Forms with electronic/typed signatures will be returned.

Each person signing certifies that all the information reported is complete and correct. The student and at least one parent whose information was reported on the 2017-2018 FAFSA must sign and date this worksheet.

Student Signature	Date	Parent/Stepparent or Spouse Signature	Date
-------------------	------	---------------------------------------	------

WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, sentenced to jail, or both.