

California Lutheran University – Office of Financial Aid

15-16
VD3

Dependent Verification Worksheet Federal Student Aid Programs

Your 2015–2016 Free Application for Federal Student Aid (FAFSA) was selected for review in a process called verification. You and at least one parent must complete and sign this worksheet, attach any required documents, and submit the form and other required documents to the Office of Financial Aid. We may ask for additional information. Should you require further instructions, please contact our office at (805) 493-3115 or finaid@callutheran.edu.

A. Student Information

Last Name First Name M.I. CLU ID # or Social Security Number

[@callutheran.edu](mailto:finaid@callutheran.edu)

Date of Birth E-mail address Current phone number (include area code)

B. Child Support Paid

One of the parents included in the household or the student paid child support in 2014. List below the names of the persons who paid the child support, the names of the persons to whom the child support was paid, the names of the children for whom the child support was paid, and the total annual amount of child support that was paid in 2014 for each child.

| Name of person who made child support payment(s) | Name of person who received child support payment(s) | Name of child for whom child support was paid | Total amount paid between January 1 – December 31, 2014 |
|--|--|---|---|
| | | | \$ |
| | | | \$ |
| | | | \$ |
| | | | \$ |

If more space is needed, provide a separate page with the student's name and ID number at the top.

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.

C. Certifications and Signatures

Each person signing below certifies that all of the information reported is complete and correct. The student and one parent whose information is reported on the FAFSA must sign and date. **WARNING: If you purposely give false or misleading information you may be fined, be sentenced to jail, or both.**

Student's Signature – Required

Date

Parent's Signature – Required

Date

RETURN TO:

**CLU Office of Financial Aid
60 West Olsen Road #1375
Thousand Oaks, CA 91360**

EMAIL: finaid@callutheran.edu

FAX: (805) 493-3114