



MIDWESTERN
STATE UNIVERSITY

Verification of Child Support Paid 2016-17

Student Name: _____ Mustangs ID: _____

You/spouse/parent(s) have indicated on your 2016-17 FAFSA that you/spouse/parent **PAID** child support in 2015. To verify the amount of child support PAID, please complete and return this form to the MSU Financial Aid Office. **Failure to complete and return this form to the MSU Financial Aid Office in a timely manner will result in a delay in the processing of your financial aid eligibility.**

This form may be FAXED to the MSU Financial Aid Office at 940:397-4852.
Or, you may MAIL this form to: 3410 Taft Blvd., Wichita Falls, TX 76308.

Child Support Paid in 2015 (January 2015 – December 2015)

Name of person who PAID child support: _____

Name of person who RECEIVED child support benefits on behalf of dependents: _____

Please indicate amount you/spouse/parent **paid** to each dependent(s), as below:

Dependent's Name: _____ Age of Dependent: _____ Amount paid for this Dependent: _____

Dependent's Name: _____ Age of Dependent: _____ Amount paid for this Dependent: _____

Dependent's Name: _____ Age of Dependent: _____ Amount paid for this Dependent: _____

Dependent's Name: _____ Age of Dependent: _____ Amount paid for this Dependent: _____

Dependent's Name: _____ Age of Dependent: _____ Amount paid for this Dependent: _____

NOTE: Additional documentation may be requested if the MSU-Financial Aid Office has reason to believe the above information is not accurate. Additional documentation may include but is not limited to:

- A copy of the separation agreement or divorce decree that shows the amount of child support to be provided;
- A signed statement from the individual receiving the child support certifying the amount of child support received; or
- Copies of the child support payment checks, money order receipts, or similar records of electronic payments having been made.

I/spouse/parent DID NOT PAY Child Support in 2015.

Certification

I certify that all information is complete and correct. In accordance with federal regulations, I understand that if I purposely give false or misleading information, I may be fined, be sentenced to jail, or both.

Student Signature _____ Date _____

Parent Signature _____ Date _____