

Office of Financial Aid

275 Mount Carmel Avenue Hamden, CT 06518-1908 Telephone: 203-582-3405

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www.quinnipiac.edu/law/financialaid

Office Location: North Haven Campus SLE-113

Child Support Paid 2019-2020

Your 2019–2020 Free Application for Federal Student Aid (FAFSA) was selected for review in a process called verification. The law says that before awarding Federal Student Aid, we may ask you to confirm the information you reported on your FAFSA. To verify that you provided correct information, we will compare your FAFSA with the information on this verification document and with any other required documents. If there are differences, your FAFSA information may need to be corrected. You must complete and sign this worksheet and return it to the School of Law Office of Financial Aid. You may be asked to provide additional information. If you have questions about verification, contact our office so that your financial aid will not be delayed.

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Last Name	First Name	M.I.	Student's Identification (ID) Number
Street Address (include apt. no.)			Date of Birth
City	State	Zip Code	Cell/Home Phone Number (include area code)

B. Independent Student's Family Information

List below the people in your household. Include:

- Yourself.
- Your spouse, if you are married.
- Your children, if any, if you or your spouse will provide more than half of their support from July 1, 2019, through June 30, 2020, even if the children do not live with you.
- Other people if they now live with you and you provide more than half of their support and will continue to provide more than half of their support through June 30, 2019.

Include the name of the college for any household member who will be enrolled <u>at least half time</u>, in a degree, diploma, or certificate program at a postsecondary educational institution any time between July 1, 2019, and June 30, 2020.

Full Name	Age	Relationship	College	Will be Enrolled at Least Half Time
Marty Jones(example)	28	Wife	Central University	Yes
		Self		

Last Name	First Name	M.I.	Student's (ID) Number	
the person(s) who paid	who is a member of my housel the child support, the name(s) ld support was paid and the tot	of the person to whom the	child support was	s paid, the name of eac
Name of Person Who Paid Child Support	Name of Person to Whom Child Support was Paid	Name of Child for Whom Support Was Paid	Age of Child For Whom Support Was Paid	Amount of Child Support Paid in 2017
Marty Jones(example)	Chris Smith	Terry Jones		\$6,000.00
If asked by my school, I wil	ll provide documentation of the	e payment of child support.	Additional docum	mentation may include
 A copy of the separation 	on agreement or divorce decree	that shows the amount of o	child support to be	e provided;
 A statement from the ir 	ndividual receiving the child su	ipport certifying the amoun	t of child support	received: or
	-			
• Copies of the child sup	port payment checks, money o	order receipts, or similar rec	ords of payments	being made.
D. Certification and S	Signature			
	certifies that all of the informa sleading information on this	-		
Full Passes, Service and an area			, ~ - ~	, 32 % 33
Student's Signature (Required))	Date		
Spouse's Signature (Optional)		Date		

Please return this signed and dated worksheet to the School of Law Office of Financial Aid by fax, e-mail, mail, or in person.

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