



### 2016-2017 Child Support Paid Verification Worksheet for Dependent Students

\_\_\_\_\_  
 Student's Last Name                      First Name                      M.I.                      Student's Social Security Number

\_\_\_\_\_  
 Student's Street Address (include apt. no.)                      Student's Date of Birth

\_\_\_\_\_  
 City State Zip Code                      Student's Email Address

\_\_\_\_\_  
 Student's Home Phone Number (include area code)                      Student's Alternate or Cell Phone Number

Your 2016-2017 FAFSA indicates one of the parents included in the household or you paid child support in 2015. 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 2015 for each child. If more space is needed, provide a separate page that includes your name at the top.

Name of Person Who Paid Child Support	Name of Person to Whom Child Support was Paid	Name and Age of Child for Whom Support Was Paid	Annual Amount of Child Support Paid in 2015
Total Amount of Child Support Paid			\$

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 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.

#### Certifications and Signatures

Each person signing below certifies that all of the information reported and any documents attached to this form are complete and correct. You are signing that you understand this verification must be completed no later than 14 days prior to the end of the first semester of enrollment and that no financial assistance will be disbursed until verification is complete. The student and one parent whose information was reported on the FAFSA must sign and date.

\_\_\_\_\_  
 Student's Signature                      Date

\_\_\_\_\_  
 Parent's Signature                      Date

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

Submit this worksheet to the Rocky Mountain College Financial Aid Office, 1511 Poly Drive, Billings, MT 59102