Certification of Child Support Paid 2015-2016 (Dependent Student)

Student Name: _______________________________  ID Number X _______________________________

Contact Number: ___________________________  Alternate or Cell Number: ___________________________

Please return this form to our Processing Center:  St. John’s University  
P.O. Box 548  
Randolph, MA 02368-0548

If one or both of the parents included in the household and/or the student paid child support in 2014, provide in the space 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 and ages 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.

If more space is needed, provide a separate page that includes the student’s name and X-ID number at the top.

<table>
<thead>
<tr>
<th>Name of Person Who Paid Child Support</th>
<th>Name of Person to Whom Child Support Was Paid</th>
<th>Name and Age of Child for Whom Support Was Paid</th>
<th>Annual Amount of Child Support Paid in 2014</th>
</tr>
</thead>
<tbody>
<tr>
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</tbody>
</table>

Total Amount of Child Support Paid $

Note: If we have reason to believe that the information regarding child support paid is inaccurate, we may require additional documentation, such as:

- 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.

☐ A mistake was made on my FAFSA; neither my parent nor I paid child support in 2014.

Certification and Signatures

Each person signing below certifies that all of the information reported is complete and correct. The student and one parent whose information was reported on the FAFSA must sign and date.

Print Student’s Name ___________________________  Student’s X ID Number ___________________________

Student’s Signature ___________________________  Date ___________________________

Parent’s Signature ___________________________  Date ___________________________

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