



Student Financial Services | 715 North Avenue |  
New Rochelle, NY 10801 | 914.633.2497 | fax  
914.885.1065 | sfs@iona.edu | www.iona.edu

### Child Support Paid Verification Form

On your 2017-2018 FAFSA form, you indicated that either you or your parent paid child support during 2016. Your FAFSA has been selected for verification. Please complete the following worksheet and fax it to the Student Financial Services Office at 914-885-1065. **Please be sure the amounts listed are actual dollars paid during the calendar year 2016. This form must be received and processed by July 15, 2017.**

Student Name: \_\_\_\_\_ ID#: \_\_\_\_\_

#### Student (Independent Students)

Did you or your spouse **pay child support** in 2016?

No       Yes (Please certify the following)

Name of Person to Whom **the child support was paid** in 2016: \_\_\_\_\_ Total Paid: \$ \_\_\_\_\_

Name of Child(ren): \_\_\_\_\_ Age: \_\_\_\_\_

\_\_\_\_\_ Age: \_\_\_\_\_

\_\_\_\_\_ Age: \_\_\_\_\_

*\*If you need additional space, please write on the back of this form*

#### Parent (Dependent Students)

Did the **parent(s) you live with pay child support** in 2016?

No       Yes (Please certify the following)

Name of Person to Whom **the child support was paid** in 2016: \_\_\_\_\_ Total Paid: \$ \_\_\_\_\_

Name of Child(ren): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

*\*If you need additional space, please write on the back of this form*

By signing this document, you certify that the information reported is complete and correct. If you purposely give false or misleading information, you may be fined, be sentenced to jail, or both. If it appears the information in this document is inaccurate, we may ask you for a statement of the support paid, copies of child support checks, and/or a copy of the divorce decree.

\_\_\_\_\_  
Student Signature      Date \_\_\_\_\_

\_\_\_\_\_  
Parent Signature      Date \_\_\_\_\_

