**2014-2015**

**Child Support Paid (V3)**

Student’s Name _________________________________________ Last Four of SSN __________________________________

- **Dependent Student**: One of the parents included in the household of the student paid child support in 2013. 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 2013 for each child.

- **Independent Student**: The student or spouse, who is a member of the student’s household, paid child support in 2013. 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 2013 for each child.

*Dependent student is required to provide parental information on the FAFSA.

*Independent student is not required to provide parental information on the FAFSA.

If more space is needed, provide a separate page that includes the student’s name and Social Security 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 of Child for Whom Support Was Paid</th>
<th>Amount of Support Paid in 2013</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jordan Jones (example)</td>
<td>Taylor Smith</td>
<td>Meri Jones</td>
<td>$6,000.00</td>
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</tbody>
</table>

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.
CERTIFICATION AND SIGNATURES

Each person signing this worksheet certifies that all the information reported on it is complete and correct. The student and one parent must sign and date.

________________________________________________________________________
Student’s Signature

________________________________________________________________________
Date

________________________________________________________________________
Parent’s Signature (required for dependent students)

________________________________________________________________________
Date

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

Do not mail this worksheet to the U.S. Department of Education.
Submit this worksheet to:
Asbury University, Financial Aid Office
One Macklem Drive
Wilmore, KY 40390

You should make a copy of this worksheet for your records.