Child Support Paid Statement

Return to:
Shippensburg University
Financial Aid Office
1871 Old Main Drive
Shippensburg, PA 17257
Telephone: 717-477-1131
Fax: 717-477-4028
Email: finaid@ship.edu

Name: ____________________________________________

SU I.D: ___________________________________________

RETURN TO:
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CHILD SUPPORT PAID STATEMENT

Federal regulations require the Financial Aid Office to verify child support paid information of the home even if not court ordered. You had listed child support paid on your FAFSA. Please use Black ink only. Please print one form for each person who support is paid for. The school must now verify the following:

Name of the person paying support: ____________________________________________

Name of the person support was paid to: __________________________________________

Name of child(ren) for who support was paid: _______________________________________

______________________________________
_____________________________________
_____________________________________

Total yearly amount paid in prior year: $____________________

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

Signature of person paying support: ____________________________________________

Date signed: ________________

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 statement from the individual receiving the child support certifying the amount of child support received; or
☐ Copies of the child support payment checks or money order receipts.