



## Northwest LTC Financial Aid Child Support Paid VERIFICATION FORM

One of the parents included in the household or the student 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 the student's name and ID number at the top.

**Student Name:** \_\_\_\_\_ **Student ID number:** \_\_\_\_\_

An **INDEPENDENT STUDENT** will be able to state at least **one** of the following statements to be true: Please indicate below by checking which statement applies to you.  
**PROOF MAY BE REQUESTED! If you are able to check a box below, YOU ARE AN INDEPENDENT STUDENT.**

- You were born before January 1, 1994.
- You were married, as of the day you filed the Free Application for Federal Student Aid (FAFSA).
- You have children for whom you will provide more than half of their support from July 1, 2017 through June 30, 2018.
- You have dependents (other than your children or spouse) who live with you and you provided more than half of their support and will continue to provide more than half of their support from July 1, 2017 through June 30, 2018.
- When you were 13 years or older you were: an orphan (both parent's deceased), in foster care, or a ward/dependent of the court
- You are a veteran of the U.S. Armed Forces.
- You are currently serving on active duty in the U.S. Armed Forces for purposes other than training.
- You are an emancipated minor as determined by a court in your state of legal residence.
- You are in legal guardianship as determined by a court in your state of legal residence.
- You are an unaccompanied homeless youth as determined by either: your high school or school district homeless liaison, the director of an emergency shelter program funded by HUD, or the director of a runaway or homeless youth basic center transitional living program.

If you **CANNOT** check a box above, **YOU ARE A DEPENDENT STUDENT.**

**Check ONE box below** based on the definition of an independent student ***as defined above*** and then complete the **APPROPRIATE** section below.

**I AM A DEPENDENT STUDENT**

(Parent must complete section A; both student and parent must sign)

**I AM AN INDEPENDENT STUDENT**

(Student must complete section B)

### **Section A: TO BE COMPLETED AND SIGNED BY PARENT**

I certify that I paid child support in 2015. I have listed below 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 amount of child support paid in 2015 for each child. I also attest that I have not included these children as members of my household size. (Parents can either include these children as members of the household \*or\* include the amount of child support paid but may not include these children as members of the household and also list child support paid).

### **Section A. CHILD SUPPORT PAID- Dependent Student - CALENDAR YEAR 2015**

| Name of Person Who Paid Child Support | Name of Person to Whom Child Support was Paid | Name of Child for Whom Support Was Paid | Amount of Child Support Paid in 2015 |
|---------------------------------------|---|---|--------------------------------------|
|                                       |   |   |                                      |
|                                       |   |   |                                      |
|                                       |   |   |                                      |

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

\_\_\_\_\_  
Date

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

\_\_\_\_\_  
Date

By my signature below, I certify that I am an Independent student and that child support is paid for the children listed in the table below during the calendar year 2014 and/or 2015. I also attest that I have not included these children as members of my household size. (Students can either include these children as members of the household \*or\* include the amount of child support paid but may not include these children as members of the household and also list child support paid).

### **Section B. CHILD SUPPORT PAID – Independent Student – CALENDAR YEAR 2015**

| Name of Person Who Paid Child Support | Name of Person to Whom Child Support was Paid | Name of Child for Whom Support Was Paid | Amount of Child Support Paid in 2015 |
|---------------------------------------|---|---|--------------------------------------|
|                                       |   |   |                                      |
|                                       |   |   |                                      |
|                                       |   |   |                                      |

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

\_\_\_\_\_  
Date

FA Office  
Use Only:  
Group V3