

THE UNIVERSITY OF ALABAMA

Student Financial Aid

2016-2017 Verification

Child Support Paid Verification – Dependent

Your 2016-17 *Free Application for Federal Student Aid* (FAFSA) was selected for verification. This verification process compares the information you submitted on your FAFSA with the information we are requesting on this form. If the information received results in a correction, you will receive a new Student Aid Report. To continue the processing of your federal financial aid, you must complete and return all requested documentation. You will not be awarded federal financial aid until all requested information has been submitted and processed.

Student Last Name _____ First Name _____ M.I. _____

Campus Wide Identification Number (CWID) _____ Date of Birth _____

Phone Number (include area code) _____ Alternate or Cell Phone Number _____

HOUSEHOLD INFORMATION

List **ALL** of the members in your parents' household in the table below. Include:

- Yourself;
- Your custodial parent(s)/stepparent;
- Your parents' other children if they receive more than half their support from your parent(s) AND will continue to receive this support between July 1, 2016 through June 30, 2017;
- Other individuals, who now live with your parent(s) AND who receive more than half of their support from your parent(s) AND will continue to receive this support between July 1, 2016 through June 30, 2017.

Write the name of the college for your parents' household members who will be attending college at least half-time between July 1, 2016 and June 30, 2017 and will be enrolled in a degree or certificate program.

NAME	AGE	RELATIONSHIP	COLLEGE
		Student	University of Alabama

You indicated on your FAFSA that one (or both) of your parents, listed above, **paid** child support because of divorce or separation or as a result of a legal requirement. The following information must be completed by parent/stepparent who paid child support. (Don't include support for children in your household.)

Name of Person Who Paid Child Support	Name of Person to Whom Child Support Was Paid	Name of Child for Whom Child Support Was Paid	Age of the Child	Annual Amount

By signing this worksheet, I (we) certify all the information reported to qualify for federal student aid is complete and correct.

Student Signature _____

Date _____

Parent/Stepparent Signature _____

Date _____