



BOISE STATE UNIVERSITY

Financial Aid and Scholarships
Administration Building Room 113
1910 University Drive
Boise, ID 83725-1315

Phone: (208) 426-1664
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Email: FinancialAid@boisestate.edu

Student - Child Support Verification 2019-2020

USE BLACK INK ONLY

Student Name: _____ **Student ID #** _____
(Print or type) Last name First name

On the Free Application for Federal Student Aid (FAFSA), you indicated that either you or your spouse paid or received child support during the 2017 calendar year. To confirm details of child support paid/received, please complete and return this form to Boise State's Financial Aid and Scholarships Office.

I did not (nor did my spouse, if married) pay or receive child support in 2017.

I did (and/or my spouse did, if married) pay or receive child support in 2017.

If you, or your spouse (if married), paid or received child support in 2017 please complete the chart below:

PAID or RECEIVED by student or spouse?	Name of person who PAID child support	Name of person who RECEIVED child support	TOTAL \$ amount paid per child for the year in 2017	Name of child, and age
Paid Received				
Paid Received				
Paid Received				
Paid Received				
Paid Received				

***If you need additional space, please write in the space below:**

Certify the validity of the above information by signing at the bottom of this page.

By signing this document, I certify that the information reported is complete and correct. If I purposely give false or misleading information, I may be fined, sentenced to jail, or both. Additional information may be requested if further clarification is necessary, or to resolve conflicting information

Student Signature (Please print this form to sign) Phone Number Date