OFFICE OF FINANCIAL AID **DIVISION OF ENROLLMENT AND ACCESS** Centennial Hall 1065 Campus Delivery Fort Collins, Colorado 80523-1065 (970) 491-6321 (970) 491-5010 FAX www.financialaid.colostate.edu



## 2021-2022 Verification of Child Support

	Student Na	me (please print)	CS	SUID
On	your FAFSA you indicated tha	t you (or your spouse, if married) paid	child support in 2019. Please check	all that apply.
Do	not leave any sections blank	د. If none, list \$0.		
п				
	AID child support for the following o	child(ren) in 2019. They do not live in my ho	ousehold and are not listed in the househo	old on my FAFS
	NAME OF CHILD(REN) FOR WHOM CHILD SUPPORT WAS PAID	TOTAL DOLLAR AMOUNT PAID IN 2019 FOR EACH CHILD LISTED	NAME OF THE PERSON TO WHOM YOU PAID CHILD SUPPORT IN 2019	
		\$		
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	NAME OF CHILD(REN) FOR WHOM CHILD SUPPOR		TOTAL AMOUNT RECEIVED IN	_
	NAME OF CHILD(REN)	RT WAS <u>RECEIVED</u>	TOTAL AMOUNT RECEIVED IN 2019	_
	NAME OF CHILD(REN) FOR WHOM CHILD SUPPOR	RT WAS <u>RECEIVED</u>	TOTAL AMOUNT RECEIVED IN	_
	NAME OF CHILD(REN) FOR WHOM CHILD SUPPOR	RT WAS <u>RECEIVED</u>	TOTAL AMOUNT RECEIVED IN 2019	_
	NAME OF CHILD(REN) FOR WHOM CHILD SUPPOR Do not include foster care o	RT WAS <u>RECEIVED</u> r adoption payments	TOTAL AMOUNT RECEIVED IN 2019 \$	_
	NAME OF CHILD(REN) FOR WHOM CHILD SUPPOR	RT WAS <u>RECEIVED</u> r adoption payments	TOTAL AMOUNT RECEIVED IN 2019 \$	_
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**SCSPEV** 2021-2022