



2017-18

Parent: Child Support Paid



AZUSA PACIFIC
UNIVERSITY

Please complete all sections using **BLACK INK**.

Student's Last Name

First Name

M. I.

APU ID Number

Why are you being asked to complete this form?

On the FAFSA, you (the parent) reported that you **paid** child support in 2016. The government requires APU to confirm this information to complete your student's application for financial aid. This does **not** include child support you **received**.

Child Support Paid in 2016

Name of person who paid child support	Name of person to whom the child support was paid	Name of child for whom the support was paid	Age of Child	Amount paid in 2016
1.				
2.				
3.				
4.				
5.				

Total: _____

By signing this form, I affirm that all information on this form and on any attachments are complete and accurate to the best of my knowledge. If requested, I agree to provide documentation to support the information I have provided on this form. I understand that any false statements or misrepresentation may be cause for denial, reduction, withdrawal, and/or repayment of financial aid, and I may be subject to a fine, imprisonment, or both, under provision of the United States Criminal Code.

Parent Signature

Date

