



CHILD SUPPORT PAID DEPENDENT

Student's Name: _____

UCF ID: _____

Parent's Name(s): _____

Phone: _____

One of the parents included in the household or the student **paid child support in 2017**. List below the names of the person/s who paid the child support, the names of the person/s 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 that was paid in the **2017** year for each child.

A) Child Support Paid

If more space is needed, provide a separate page that includes the student's name and UCF ID at the top.

Name of Person Who Paid Child Support	Name of Person to Whom Child Support was Paid	Name of Child for Whom Support Was Paid	Age of Child	Amount of Child Support Paid in 2017

Note: If we have reason to believe that the information regarding child support paid is not accurate, we may require additional documentation.

B) Your Household Size

Do not include children listed as receiving child support in Section A of this form. If you did provide child support to a child living with you, please attach an explanation. Be sure to provide complete information for each household member and enter N/A for items that do not apply. Leaving items blank on any household member can result in processing delays.

1. You and Your Parent(s)/Step-Parent

Full Name	Date of Birth	Relationship
		Student / Self
		Parent 1 (father, mother, stepparent)
		Parent 2 (father, mother, stepparent)

2. Dependents

List siblings who will receive more than half of their financial support from your parent(s) between July 1, 2019 and June 30, 2020, or are required to use parent information when completing the FAFSA.

Full Name	Date of Birth mm-dd-yyyy	Relationship	If attending college, list: College Name, City, State	Type of Degree Seeking
John Example	01/25/1996	brother	UCF Orlando, FL	BA
1.				
2.				
3.				
4.				
5.				
6.				

Student's Signature

Date

Parent's Signature

Date