



ST. FRANCIS COLLEGE

BROOKLYN HEIGHTS, NEW YORK

Student Financial Services

180 Remsen Street Brooklyn, NY 11201

Phone: 718-489-5255

fax 718-643-0076 Email: sfs@sfc.edu

**2017-2018 Child Support Paid
(Independent Student)**

Independent Student Information

Student's Last Name First Name M.I. Student's Identification (ID) Number

Student's Street Address (include apt. no.) Student's Date of Birth

City State Zip Code Student's Email Address

Student's Home Phone Number (include area code) Student's Alternate or Cell Phone Number

If the student and/or spouse, who is a member of the student's household, paid child support in 2015, provide in the space below the names of the persons who paid the child support, the names of the persons to whom the child support was paid, the names and ages of the children for whom the child support was paid, and the total annual amount of child support that was paid in 2015 for each child.

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

| Name of Person Who Paid Child Support | Name of Person to Whom Child Support was Paid | Name and Age of Child for Whom Support Was Paid | Annual Amount of Child Support Paid in 2015 |
|---------------------------------------|---|---|---|
| | | | |
| | | | |
| | | | |
| | | | |
| Total Amount of Child Support Paid | | | \$ |

Note: If we have reason to believe that the information regarding child support paid is inaccurate, we may require additional documentation, such as:

- A signed statement from the individual receiving the child support certifying the amount of child support received; or
- Copies of the child support payment checks, money order receipts, or similar records of electronic payments having been made.

Certification and Signatures

Each person signing below certifies that all of the information reported is complete and correct.

WARNING: If you purposely give false or misleading information, you may be fined, sent to prison, or both.

Print Student's Name

Student's ID Number

Student's Signature (Required)

Date

Spouse's Signature (Optional)

Date