

Office of Student Financial Aid

400 Magnolia Street Orangeburg, SC 29115 Telephone: (803) 535-5334

Fax: (803) 535-5383

<u>Confirmation of Child Support Received by Student/Spouse (3 Parts)</u> 2016 – 2017

We have received your 2016-2017 Free Application for Federal Student Aid (FAFSA). We are required to clarify any child support received by the student or spouse in your household. Please complete the items below for each person to whom child support was received. Once completed, please sign and return this form to the address or fax number provided at the top of this form.

Recipient Number 1
Name of Person to Whom Child Support Was Received:
Total Amount of Child Support Received to Person Above During 2015: \$
Name of Child or Children for Whom Child Support was Received:
Recipient Number 2 (If Applicable)
Name of Person to Whom Child Support Was Received:
Total Amount of Child Support Received to Person Above During 2015: \$
Name of Child or Children for Whom Child Support was Received:
Recipient Number 3 (If Applicable) Name of Person to Whom Child Support Was Received: Total Amount of Child Support Received to Person Above During 2015: \$
Name of ${f C}$