

Student Information (Please Print)

Student's Last Name	Student's First Name	Student's M.I.	Student's CPCC Student ID#
Student's Street Address (include apt. no.)			Student's CPCC Email Address
City	State	Zip Code	Student's Telephone # (include area code)

Warning: According to the U.S. Department of Education, if you purposely give false or misleading information, you may be subject to a fine of up to \$20,000 or imprisonment for up to 5 years, or both.

A. Child support NOT paid

I did not and my parents did not pay child support.

B. Child support PAID information – Complete ALL lines.

Either I or my parents did pay child support.

Central Piedmont Community College's Financial Aid Office considers child support paid by *the student or the student's custodial parent* in the prior tax year (January 1 through December 31).

IMPORTANT: The child for whom the child support was paid CANNOT be a child included in the number in the household on the student's FAFSA.

If we have reason to believe the information regarding child support paid is inaccurate, we will ask you to attach verification. Acceptable documentation would be a signed, notarized statement from the individual receiving the child support verifying the amount received for the year, copies of the cancelled child support checks, money order receipts or similar records of electronic payments having been made, or a pay stub (from the end of the tax year) showing the year-to-date child support wage garnishments/deductions/withholdings.

If you need additional space, please include your written information with this form

Who paid child support (indicate name)? _____			
Relationship to you (the student): <input type="checkbox"/> Self <input type="checkbox"/> Parent			
Name of Person to Whom Child Support was Paid	Name of Child	Age	\$ _____ Yearly Total Paid
Was this child included in the number in the household on the student's FAFSA?			<input type="checkbox"/> Yes <input type="checkbox"/> No

Who paid child support (indicate name)? _____			
Relationship to you (the student): <input type="checkbox"/> Self <input type="checkbox"/> Parent			
Name of Person to Whom Child Support was Paid	Name of Child	Age	\$ _____ Yearly Total Paid
Was this child included in the number in the household on the student's FAFSA?			<input type="checkbox"/> Yes <input type="checkbox"/> No

Who paid child support (indicate name)? _____			
Relationship to you (the student): <input type="checkbox"/> Self <input type="checkbox"/> Parent			
Name of Person to Whom Child Support was Paid	Name of Child	Age	\$ _____ Yearly Total Paid
Was this child included in the number in the household on the student's FAFSA?			<input type="checkbox"/> Yes <input type="checkbox"/> No

If you need additional space, please include your written information with this form

For your convenience, please list all payments actually made (this may be different from court ordered amounts) last year.

Month Paid	Amt. Paid for Child #1	Amt. Paid for Child #2	Amt. Paid for Child #3	Total Paid for Month
January	\$	\$	\$	\$
February	\$	\$	\$	\$
March	\$	\$	\$	\$
April	\$	\$	\$	\$
May	\$	\$	\$	\$
June	\$	\$	\$	\$
July	\$	\$	\$	\$
August	\$	\$	\$	\$
September	\$	\$	\$	\$
October	\$	\$	\$	\$
November	\$	\$	\$	\$
December	\$	\$	\$	\$
			Total Yearly Amount Paid	\$

Certification and Signature

Please provide your signature. Since you are a dependent student, please also provide one parent's signature whose information is listed on your FAFSA. By providing these signatures, you are certifying that all of the information on this form is complete and correct. You are also authorizing Central Piedmont Community College to make corrections to your original and/or subsequent applications based on the documents you are now submitting.

Student Signature:	Date:
Parent Signature:	Date: