

Student Name _____ Banner ID + _____

Student Email _____@MiamiOH.edu Daytime Phone #: _____

 For more information on verification and other important terms, please visit [MiamiOH.edu/Verification](https://miamiOH.edu/Verification).

 For **independent** students: Did the student and/or spouse pay child support in 2019?

- Yes (complete table below)
- No

 For **dependent** students: Did the FAFSA parent(s) pay child support in 2019?

- Yes (complete table below)
- No

2019 Child Support Paid

*Do **not** include child support paid for children that are included in the household on the FAFSA.

Name of Adult Who Paid Child Support	Name of Adult Who Received the Child Support	Name of Child for Whom Child Support was Paid*	Current Age of Child for Whom Child Support was Paid	Total Amount of Child Support Paid in 2019

CERTIFICATION: I certify that all information reported to qualify for federal student aid is complete and correct, and that purposely giving false or misleading information may lead to fines, prison, or both.

 Student Signature (Wet signature only)

 Date

 Parent Signature (Wet signature only)
 (Required if student is dependent)

 Date

Please return this form to the One Stop:

 Miami University - One Stop - 301 S. Campus Ave. - Oxford, OH 45056 513-529-0001
 Email: OneStop@MiamiOH.edu - Fax: 513-529-8713 - Web: MiamiOH.edu/OneStop