

2015 – 2016  
V3 Child Support Paid  
Verification Worksheet



Student Financial Aid Office  
11400 Robinwood Drive  
Hagerstown, MD 21742

finaid@hagerstowncc.edu  
FAX: 301-791-9165

**WARNING:** If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.

Your application was selected for review in a process called "Verification". When a student's file is selected for verification, the Financial Aid Office must document and validate certain data elements from the FAFSA. The law says we must ask you for additional information before awarding Federal Aid and Maryland Grants or Scholarships. If there are differences between your application information and your financial documents, the Financial Aid Office may need to make corrections electronically, and you may receive a corrected Student Aid Report (SAR).

**Instructions: Complete all pages of this verification form and submit it to HCC Student Financial Aid Office as soon as possible, so that your financial aid won't be delayed. Please contact us if you need any additional information to fill out this form.**

**Student Information**

\_\_\_\_\_  
Last Name                      First Name                      MI

**All address and phone number corrections should be made on WebAdvisor.**

\_\_\_\_\_  
HCC ID Number

Please answer the question below.

❖ In 2014 did anyone in the household PAY child support?

Student/Spouse                       Parent                       None

**If yes** – Complete the chart below. *(If you need more space, attach a separate page.)*

Name of the person who paid Child Support	Name of the child for whom the support was paid	Age	Name of the person to whom you paid the support.	Amount paid in 2014

**By signing this form you are certifying that all the information reported on it is complete and correct.**

\_\_\_\_\_  
Student Signature                      Date

\_\_\_\_\_  
Parent Signature (required for Dependent Student)                      Date

Office Use Only: Dep \_\_\_\_ Ind \_\_\_\_ Initial \_\_\_\_