

**WILLIAM PENN UNIVERSITY**  
**2016-17 VERIFICATION OF**  
**CHILD SUPPORT PAID**  
**Independent Student**

Your 2016-17 Free Application for Federal Student Aid ( FAFSA ) was selected for review in a process called verification. To verify that you provided correct information, William Penn University will compare your FAFSA with the information on this worksheet and any other required documents. If there are differences, your FAFSA information may need to be corrected. William Penn will make the corrections on your behalf.

You must complete and sign this worksheet and submit to William Penn University. William Penn University may request additional information once the review process begins. If you have questions about verification, contact Ann Johnson at ( 800 ) 779-7366 option 2 or ( 641 ) 673-1184.

Send documentation by:

**MAIL:**

William Penn University  
 Office of Financial Aid  
 201 Trueblood Avenue  
 Oskaloosa , IA 52577

OR

**FAX:**

641-673-1115

OR

**EMAIL:**

johnsona@wmpenn.edu

If 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 person(s) who paid the child support, the names of the person(s) 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	Amount of Child Support Paid in 2015

Note: If we have reason to believe that the information regarding child support paid is not accurate, 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 signature**

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, be sentenced to jail, or both.

\_\_\_\_\_  
 Student's Name (Print Name)

\_\_\_\_\_  
 Date of Birth

\_\_\_\_\_  
 Student's Signature

\_\_\_\_\_  
 Date