## PEPPERDINE UNIVERSITY

Graziadio School of Business and Management

## 2015–2016 V3 Child Support Paid Verification Worksheet Independent Student

Your 2015–2016 Free Application for Federal Student Aid (FAFSA) was selected for review in a process called verification. The law says that before awarding Federal Student Aid, we may ask you to confirm the information you reported on your FAFSA. To verify that you provided correct information, we will compare your FAFSA with the information on this institutional verification document and with any other required documents. If there are differences, your FAFSA information may need to be corrected. You must complete and sign this institutional verification document, attach any required documents, and submit the form and other required documents to us. We may ask for additional information. If you have questions about verification, contact us as soon as possible so that your financial aid will not be delayed.

Student's Last Name	First Name	M.I.	Campus Wide ID (CWID)	
Student's Street Address (include apt. no.)			Student's Date of Birth	
City State Zip Code			Student's Email Address	
Student's Home Phone Number (include area code)			Student's Alternate or Cell Phone Number	
Section 2 - Child Supp	oort Paid			
Did you or your spouse, if ma	urried, pay child suppo	rt in 2014?		
☐ Yes				
□ No				
If yes, please provide the info	rmation in the table be	elow.		

Name of Person Who Paid Child Support	Name of Person to Whom Child Support was Paid	Name of Child for Whom Support Was Paid	Amount of Child Support Paid in 2014
		Total Amount of Child Support Paid	\$

**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 statement from the individual receiving the child support certifying the amount of child support received; or

If more space is needed, provide a separate page that includes the student's name and ID number at the top.

Copies of the child support payment checks or money order receipts.

Student's Name:	CWID	
Section 3 - Signature(s) Required	WARNING: If you purposely give false or misleading information you may be fined, be sentenced to jail, or both.	
Each person signing below certifies that all of the information reported is complete and correct. The student must sign and date.		
Print Student's Name	Campus Wide ID (CWID)	
Student's Signature (Required)	Date	
Spouse's Signature (Optional)	Date	

Send completed & signed document to gsbmfinancialaid@pepperdine.edu or submit via fax to (310) 568-2364