



2022-2023 Child Support Verification

Financial Aid Office
444 Western Blvd
Jacksonville, NC 28546-6816
Fax: 910-455-2767
Email: finaid@coastalcarolina.edu

A: Student Information

Student's Last Name _____ Student's First Name _____ Student's M.I. _____ Student's CCCC ID Number _____

B: Household and Family Information

Write the names of all household members in the spaces below. Also, write the name of the college for any household member excluding parent(s) who will be attending at least half time between July 1, 2022 through June 30, 2023 and will be enrolled in a degree, diploma or certificate program.

Name	Age	Relationship	Name of College (If enrolled at least half-time)
		<i>Self</i>	<i>Coastal Carolina Community College</i>
Total # in household: _____			Total # in college: _____

C: Child Support

Enter the amount of child support received or paid by you or a family member in your household during the 2020 calendar year.

Name Of Person who paid support	Name of person to whom child support was paid	Name of child for whom support was paid	Amount paid monthly in 2020

Note: If we have reason to believe that the information regarding child support is not accurate, we may require additional documentation, such as separation agreement, divorce decree, documentation from the State, etc.

Certification and Signatures

I/We certify that all of the information reported on this worksheet is complete and correct.

Student Signature _____ Date _____

Spouse Signature _____ Date _____

Parent Signature (Dependent Student Only) _____ Date _____

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