



SUNY Potsdam One Stop/Financial Aid
 44 Pierrepont Ave, Potsdam, NY 13676
 Phone: (315) 267-2943; Fax: (315) 267-3067
 onestop@potsdam.edu

Child Support Verification Form – Independent Students

Please provide the information requested below to verify that you provided correct information on your FAFSA. We will make corrections to your FAFSA if necessary. You must complete and sign this form, attach any required documents, and submit the form to our office. We may ask for additional information. Your financial aid will be on hold until we receive and review the completed form and documentation.

Student Name _____

Potsdam ID _____

- A. Please report all members of your household between July 1, 2021 and June 30, 2022, including **yourself** and your **spouse**, and all **children and dependents** who will receive at least half of their support from you and/or your spouse between July 1, 2021 and June 30, 2022.

| Household member Name | Relationship to student | Date of Birth | Name of college, if attending at least half-time in 2021-2022 |
|-----------------------|-------------------------|---------------|---|
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- B. Please report any child support paid or received in 2019 (select one option):

- Neither I, nor my spouse if applicable, **paid or received** child support in 2019.
- I and/or my spouse, if applicable, **paid or received** child support in 2019. I have listed the information below. If requested, I will provide documentation of the payment of child support. *Additional children may be reported by attaching a separate page that includes the student's name and Potsdam ID.*

| Name of parent who paid the child support | Name of parent who received the child support | Name of child for whom child support was paid | Amount of annual child support paid or received in 2019 |
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Student's Full Name (Please Print) _____

Date of Birth _____

Student's Signature _____

Date _____

Upload to our secure file drop location at <https://filedrop.potsdam.edu/finaid>