

RETURN TO:

San Bernardino	<u>2013-2014 I</u>	2013-2014 Independent Child Support Paid Form			
Valley College	Name of Financial Aid Applicant (Please Print)				
RETURN TO: San Bernardino Valley Col Financial Aid Office - AD/S 701 S. Mount Vernon Ave San Bernardino, CA 9241	SS 106 Student ID#:	First Month Social Se	Middle Day Year curity#:		
Your 2013–2014 Free Application that before awarding Federal Stuverify that you provided correct on this worksheet and with any county and your spouse must complete documents to the financial aid a verification, contact your financial for any section of this form, attact at the top of the page.	ident Aid, we may ask you to coinformation the financial aid adother required documents. If the and sign this worksheet, attach dministrator at your school. You all aid administrator as soon as p	onfirm the information you and ministrator at your school will core are differences, your FAFSA in any required documents, and sur school may ask for additional ossible so that your financial aid	your spouse reported on your FA compare your FAFSA with the information may need to be correctly bright the form and other required information. If you have question will not be delayed. If more span	AFSA. To ormation cted. You ed ns about ce is needed	
A. Independent Student's #					
indicated below the support was paid, th	I) my spouse who is in the house name of the person who paid th e names of the children for who	d support in 2012. ehold, paid child support in 2012 ne child support, the name of the om child support was paid, and the d by my school, I will provide do	e person to whom the child ne total annual amount of child		
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 2012		

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 2012

". Certification and Signatures

I certify that all of the information reported on this worksheet is complete and correct. The student must sign this form. If married, the spouse's signature is optional.	WARNING: If you purposely give false or misleading information on this form, you may be fined, be sentenced to jail, or both.
Student's Signature	Date
Spouse's Signature	Date

DO NOT MAIL THIS FORM TO DEPT OF EDUCATION - PLEASE SEND TO THE SBVC FINANCIAL AID OFFICE.