Child Support Paid
2016–2017

Your 2016–2017 Free Application for Federal Student Aid (FAFSA) was selected for review in a process called verification. You indicated on FAFSA that someone in your household has paid child support in 2015. We must verify this information before awarding Federal Student Aid. In this process, Office of Student Financial Aid Services will compare your FAFSA with the information provided on this worksheet and with any other required documents. If there are differences, your FAFSA information may need to be corrected. You and at least one parent must complete and sign/date this worksheet and submit to the Office of Student Financial Aid Services. We may request additional information.

STUDENT INFORMATION

<table>
<thead>
<tr>
<th>Last Name</th>
<th>First Name</th>
<th>M.I.</th>
<th>NJIT ID</th>
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Phone Number | NJIT Email
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CHILD SUPPORT PAID

Check one: Dependents Student: ☐ Did either of your parent(s) pay child support for the year 2015?

☐ Yes ☐ No

Independent Student: ☐ Did either you or your spouse pay child support for the year 2015?

☐ Yes ☐ No

If yes, please provide the information below. If requested, you will be required to provide documentation of the payment of child support.

<table>
<thead>
<tr>
<th>Name of Person Who Paid Child Support</th>
<th>Name of Person to Whom Child Support was Paid</th>
<th>Child for Whom Support Was Paid</th>
<th>Annual Amount of Child Support Paid in 2015</th>
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<tbody>
<tr>
<td></td>
<td></td>
<td>Name</td>
<td>Age</td>
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CERTIFICATION AND SIGNATURES

By signing this worksheet, I (we) certify that all of the information reported on this worksheet is complete and correct. If the student is a dependent, at least one parent must sign. Warning: If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to prison, or both. Computer generated signatures are not acceptable.

_________________________________  ____________________________
Student Signature                  Date

_________________________________  ____________________________
Parent Signature (Required for Dependent Students) Date

Upload Completed Form/Documents to: https://mappingyourfuture.org/MappingXpress/NJITFA/

Mail or Fax:
Student Financial Aid Services
NJIT - Student Mall, University Heights
Newark, NJ 07102 Fax: 973-596-6471