



2015-2016 Verification of Child Support Paid Independent/Dependent – (V3, V4)

Your 2015-2016 Free Application for Federal Student Aid (FAFSA) was selected by the U.S. Department of Education for a review process called "Verification". In this process, we are required by federal regulations to verify information you and if applicable your parents reported on the FAFSA. You must complete the "Verification" process before any Federal Student Aid can be awarded. Complete and submit this form along with any requested supporting documentation.

STUDENT INFORMATION (Please Print)

Last Name	First Name	M.I.	TSU T#
Address			Date of Birth
City	State	Zip Code	Email
Home Phone Number (include area code)			Alternate/Cell Phone Number

FAMILY INFORMATION

Please check the box that indicates your current status, and then **list all the people in your (if independent) or your parents' (if dependent) household.** List the name of the college for any household member who will be attending college at least half-time between 07/01/2015 and 06/30/2016. List all family members in household whether or not they are in college.

Dependent*

*A student is considered dependent if he/she was required to provide parental data on the FAFSA.

Please include:

- You and your parent(s), including stepparents.
- Your parents' dependent children, if your parents will provide more than half of their support.

Independent**

**A student is considered independent if he/she was not required to provide parental data on the FAFSA.

Please include:

- You and your spouse, if married.
- Your dependent children, if you will provide more than half of their support.

Full Name	Age	Relationship	College
		Self	Tennessee State University
		Parent 1 (dependent only)	N/A
		Parent 2 (dependent only)	N/A



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CHILD SUPPORT PAID Check the appropriate box below: (Only one box)

- No child support was paid for individuals outside of the household in 2014.
- Child Support **was paid** by a member of the household in 2014. If so, indicate below the name of the person who paid the support, the name to whom the child support was paid, the names of the children for whom child support was paid, and the total annual amount of child support that was paid in 2014 for each child. If asked by the school, I will provide documentation of the child support. **If you need more space, attach a separate page.**

Name of Person who paid Child support	Name of Person to whom child support was paid	Name of child for whom support was paid	Age of Child	Total 2014 Amount paid

CERTIFICATION STATEMENT:

By signing below, I understand my financial aid will be terminated if I fail to submit requested documents or knowingly provide false information on any financial aid documents required by Tennessee State University. Financial Aid awarded on the basis of false information will be billed to me. False or fraudulent information may be reported to the Federal Office of the Inspector General and/or the University Dean of Students. **WARNING: Under penalty of law, if you purposely give false or misleading information on this form, you may be fined, be sentenced to jail, or both.**

Student Signature **Date**

Parent Signature (required for dependent students) **Date**

Office of Student Financial Aid
 3500 John A Merritt Blvd, Campus Box 9615
 Nashville, TN 37209-1561
 Phone: (615)963-5701 | Toll Free: 1-(888) 328-4636
 Fax: (615)963-7540 | Email: finaid@tnstate.edu