



C O K E R

C O L L E G E

CHILD SUPPORT RECEIVED

Student Name _____ Student ID# _____

Complete this form and return to the Office of Student Financial Planning. Note: if we have reason to believe that the information is not accurate, we may require additional documentation such as: a copy of the separation agreement or divorce decree that shows the court-mandated child support payment responsibility; copy of the child support payment checks or money order receipts; and/or a copy of payments received by the clerk of court.

NAME OF PERSON WHO PAID CHILD SUPPORT	NAME OF PERSON THAT RECEIVED CHILD SUPPORT	NAME OF CHILD FOR WHOM SUPPORT WAS RECEIVED	AGE OF CHILD	TOTAL CHILD SUPPORT RECEIVED IN 2015

Student Signature _____ Date _____

Parent Signature (for a Dependent Student) _____ Date _____