SOUTHERN ILLINOIS UNIVERSITY EDWARDSVILLE

Student Financial Aid

2308 Rendleman Hall Campus Box 1060 Edwardsville, IL 62026-1060 Phone: (618) 650-3880 Fax: (618) 650-3885

Email: finaid@siue.edu Homepage: www.siue.edu/financial-aid

2024-2025

Child Support Paid

NCWS

Student Name		Univ. ID#	
	☐ No one in our housel	nold PAID child support in 2022.	
Child Support Paid			
separation or as a result of a legal re-	equirement as reported on the FA	ou and/or your spouse (if married) during AFSA. Report the name of the person wind age for whom it was paid, and the an	ho paid the support, the name
Do not include sup	port for children included in y	our household, as reported on your 20	024-2025 FAFSA.
Name of person who paid child support:	Name of person to whom support was paid:	Name and Age of child for whom the support was paid:	Amount of child support paid in 2022:
1.			\$
2.			\$
3.			\$
4.			\$
Total Amount of Child Support Paid			\$
☐ Check this box and at	tach a list if there are more than	four children for which child support w	as paid in 2022.
ote: If we have reason to believe the ocumentation, such as:	e information regarding child su	apport paid is inaccurate, we may require	e additional
• Copies of the child support p been made.	payment checks, money order re	ceipts, or similar records of electronic p	ayments having
certify that ALL of the information	on this form is true and complet	re	
Required Student Signature	Date	Required Parent Signature	Date

If typed/electronic signature is submitted, this form will be considered incomplete and financial aid will be delayed.