

## **Child Support Form**

Independent Student 2025-2026 Academic Year

Office of Financial Aid and Scholarships • Indiana University South Bend • P.O. Box 7111 • South Bend, IN 46634-7111

Phone: (574) 520-4357 Fax: (574) 520-5561 Email: sbfinaid@iu.edu Website: financialaid.iusb.edu

Securely upload required documents/forms: go.iu.edu/FAsecure

Student Name			Student ID Number			
Please Print)	Last	First	Middle			
If anyone inclu	ded in the h	ousehold rece	eived or paid child supp	ort in 2023, comp	lete the table belo	w.
Person Who Paid Child Support		to Whom upport Was	Child for Whom Support Was Paid	Age of Child for Whom Support Was Paid	Annual Amount of Support <i>RECEIVED</i> in 2023	Annual Amount of Support <i>PAID</i> in 2023
	ild support r upport in 202	•	e FAFSA was listed in e	error. Neither mys	elf nor my spouse	received or paid
nd correct. If a	asked, I will	provide docur	rson signing this form comentation of the paymentation of the paymentalse or misleading info	nt of child suppor	t. The student mus	t sign and date
Student Signature				Date		
0: (				5	ata	