2016-17
Student Child Support Paid Form
(F7FCSS)

Marquette University, Office of Student Financial Aid
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Website: marquette.edu/mucentral/
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Student
Legal Name: ____________________________________________  MUID #: __________________

Last  First  M.I.

If you and/or your spouse (if applicable), who is a member of your household, paid child support in 2015, provide in the chart below the names of the person(s) who paid the child support, the names of the person(s) to whom the child support was paid, the names and ages of the children for whom the child support was paid, and the total annual amount of the child support that was paid in 2015 for each child.

<table>
<thead>
<tr>
<th>Legal Name of Person Who Paid Child Support</th>
<th>Legal Name of Parent/Guardian to Whom Support Was Paid</th>
<th>Legal Name of Child for Whom Support Was Paid</th>
<th>Age of Child</th>
<th>Annual 2015 Amount Paid Per Child</th>
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Note: If we have reason to believe that the information regarding child support paid is not accurate, we may require additional documentation.

Did you, the student, or your spouse (if applicable) pay child support in 2015?
(Please check one) Yes ☐  No ☐

*If Yes, complete the chart below. Do not list child support paid for children included in your household on the 2016 - 2017 FAFSA.

Required Signatures:
By signing this form I certify that all the information reported is true and complete to the best of my knowledge. If married, the spouse’s signature is optional.

__________________________________________      ____________________________________
Student’s Signature                      Date            Spouse’s Signature       Date