

Financial Aid Office
2755 E. Napier Avenue
Benton Harbor, MI 49022

Phone: 269-927-8112
Fax: 269-927-8183
Email: finaid@lakemichigancollege.edu



2016-17 Child Support Paid Verification

Step 1: Student Information

First Name	Last Name	Social Security Number
LMC ID	Local Phone Number (include area code)	Email Address

<input type="checkbox"/>	<input type="checkbox"/>
Yes	No

Did you, your spouse or your parents (if dependent on FAFSA) pay child support because of divorce or separation in calendar year 2015? If Yes, complete the chart below.

Name of Person Who Support was Paid to:	Name of Child for Whom Support was Paid	Amount of Support Paid in 2015

Step 2: Certification

By signing this worksheet, I certify all the information reported is complete and correct.

Student Signature	Date
Parent Signature (if student is dependent)	Date