



# Child Support Statement- Dependent Student 2019-2020

Financial Aid Office

Telephone: (860) 297-2046  
300 Summit Street  
Hartford, CT 06106

Fax: (860) 987-6296  
Email: [financial-aid@trincoll.edu](mailto:financial-aid@trincoll.edu)

## Student Information

\_\_\_\_\_, \_\_\_\_\_,

\_\_\_\_\_, \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## I: Child Support Paid

Please complete the following listing the annual amounts of Child Support you and your family **paid** during 2017 and during 2018:

Name of Person Who Paid Child Support	Name of Person to Whom Child Support Was Paid	Name of Child for Whom Support Was Paid	Age of Child for Whom Support Was Paid	Amount of Child Support Paid 2017	Amount of Child Support Paid 2018
<i>Marty Jones (example)</i>	<i>Chris Smith</i>	<i>Terry Jones</i>	<i>12</i>	<i>\$6,000.00</i>	<i>\$6,000.00</i>
				\$	\$
				\$	\$
				\$	\$

## II: Child Support Received

Please complete the following listing the annual amounts of Child Support you and your family **received** during 2017 and during 2018:

Name of Person Who Received Child Support	Name of Person Who Paid Child Support	Name of Child for Whom Support Was Received	Age of Child for Whom Support Was Received	Amount of Child Support Received 2017	Amount of Child Support Received 2018
<i>Marty Jones (example)</i>	<i>Chris Smith</i>	<i>Terry Jones</i>	<i>12</i>	<i>\$6,000.00</i>	<i>\$6,000.00</i>
				\$	\$
				\$	\$
				\$	\$

## III: Other Support Received

Please complete the following listing the annual amounts of **other support received** during 2017 and during 2018. (Example: mortgage, food, rent, clothing, etc.)

Type of Support	Name of Person from Whom Support was Received	Name of Person to Whom Support Was Paid	Amount of Child Support Received 2017	Amount of Child Support Received 2018
<i>Food (example)</i>	<i>Chris Smith</i>	<i>Marty Jones</i>	<i>\$4,000.00</i>	<i>\$4,000.00</i>
			\$	\$
			\$	\$
			\$	\$

## IV: Certification & Signatures

By signing this statement, we certify that all the information reported is complete and correct. **Federal Aid Warning:** If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.

\_\_\_\_\_  
Student Signature (must be handwritten)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent 1 Signature (must be handwritten)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent 2 or Step-Parent Signature (must be handwritten)

\_\_\_\_\_  
Date