

Financial Aid Office

6420 SE 15th St • Midwest City, OK 73110 • Student Services Building, Room 200 Phone: (405) 733-7424 • Fax: (405) 736-0359 • Email: finaid@rose.edu

Student Name:	
	RSC Student ID #:
	Please fill out in Blue or Black Ink only
Scann	ned or printed copies only, photos of completed forms will not be accepted
	n amount of <i>child support RECEIVED</i> by a member of your household during 2022 calendar year (Jan. of divorce, separation, or legal requirement. Please complete the appropriate section below to verify the ported on the FAFSA.
	Independent Student
Either I, or if married my spouse by you or your spouse for the ca	e, RECEIVED child support in 2022 Please report the ANNUAL amount of child support that was <u>received</u> alendar year 2022
\$	Total annual child support received by student and/or spouse in 2022
If asked by the school, I will pro	ovide documentation of the receipt of child support.
	all of the information reported is complete and correct. I understand I may be asked to verify all of the orm. WARNING: If you purposely give false or misleading information on this form, you may be fine
Student Signature	 Date
Student Signature	Dependent Student
One of my parents included in t	
	Dependent Student the household reported on my FAFSA REPORTED child support received in 2022 Please report the
One of my parents included in t ANNUAL amount of child suppo \$	Dependent Student the household reported on my FAFSA REPORTED child support received in 2022 Please report the port that was received by your parent for the calendar year 2022
One of my parents included in t	Dependent Student the household reported on my FAFSA REPORTED child support received in 2022 Please report the

Parent Signature

Date

Student Signature

Date