Submit securely online: ksu.edu/sfa/upload Student's Name (Last, First, MI) Student's K-State Email Address Deliver in person: 119 Anderson Hall | 919 Mid-Campus Drive North Manhattan, Kansas 66506-0107 Wildcat Identification Number Student's Phone Number

To complete the verification process, the amount of child support that you (the student) and/or your spouse paid during 2023 must be verified.

Please complete the section below with the specific information requested.

Certification Statement

- Only include amounts of child support paid to those not listed in your family.
- Do not include any amounts of child support paid by members of your household in this section.
- If you did not pay child support in 2023, mark "N/A" in Name of Person Who Paid Child Support and "0" in Total Amount of Child Support Paid

| Name of Person Who Paid Child Support Must be family member | Name of Person to Whom Child Support was Paid Must not be listed in family | Name of Child for Whom Support was Paid Must not be listed in family | Age of Child for Whom Support was Paid Must not be listed in family | Total Amount of Child Support Paid in 2023 |
|---|--|--|---|---|
| (Example) Marty Jones | Chris Smith | Terry Jones | 10 | \$6,000 |
| | | | | |
| | | | | |
| | | | | |

| certification statement | | | |
|--|--------------------------|---|------|
| By signing this verification form, I certify | that all of the informat | cion reported is complete and accurate. | |
| Signature of Student (required) | Date | Signature of Parent on FAFSA | Date |
| | | Required for Dependent Students Only | |