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## 2019-2020 Child Support Received Clarification

STUDENT: \_\_\_\_\_ FIDN#: A \_\_\_\_\_  
                    Last Name                      First Name

Please clarify the amount of child support received by your parent(s) in 2017.  
Enter "0" if the answer is Zero. Do not leave blank.

Total Amount of Child Support Received by your parent(s) in 2017: \$ \_\_\_\_\_

_____	_____	_____
Student's Name (Print)	Student's Signature	Date
_____	_____	_____
Parent's Name (Print)	Parent's Signature	Date

**By signing this form, you certify the information reported above is true and accurate to the best of your knowledge. If additional information is requested, you agree to provide us with any supporting documentation to verify the information stated above. The student and at least one parent (for dependent students) must provide a signature.**