FRAMINGHAM STATE UNIVERSITY

CHILD SUPPORT RECEIVED
2027-2028 Academic Year

Student Name: _____ ID #: _____

This form must be completed to verify the amount of child support received in the last complete calendar year preceding the date that you originally filed your 2027-2028 Free Application for Federal Student Aid (FAFSA).

If the 27-28 FAFSA was first filed in 2026, you would report child support received in 2025. If the 27-28 FAFSA was first filed in 2027, you would report child support received in 2026.

Child support **received by the parent** (if the student is dependent) for all children. $_____

(Don't include foster care or adoption payments.)

Child support **received by the student** (if independent) for all children. $_____

(Don't include foster care or adoption payments.)

CERTIFICATION AND SIGNATURE

Each person signing below certifies that the information on this form is complete and correct. **Digital signatures are not accepted.**

Signature of Person Completing This Form _____ **Date** _____

Return this completed form to:

Financial Aid Office • Framingham State University • McCarthy Center, 5th Floor • 100 State Street
Framingham, MA 01701 Phone: (508) 626-4534 • Fax: (508) 626-4598 financialaid@framingham.edu