EARLHAM COLLEGE 2025-26 FINANCIAL AID

CHILD SUPPORT PAID STATEMENT

Complete this form only if specifically requested by the Earlham College Office of Financial Aid.

SECTION A · STUDENT INFO	RMATION	
Student Name		Student ID Number
Please print or type		
Street address	City	State Zipcode
SECTION B · ANNUAL CHILD	SUDDODT DAID	
Provide the following information about child support PAID by either the student or the parent(s)		
	e Application for Federal Student Aid (FA	
Total 2024 Child Support Paid	To whom was the child support paid?	
\$		
Name(s) of the child/children for whom t	he child support was paid	
SECTION C · SIGNATURES		
Student Signature		Date
Parent Signature		Date