

Earlham College Financial Aid Office

Child Support Statement

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

Section A: Student Information

Student's Name (please print) _____

Social Security Number _____-_____-_____

Street Address: _____

City, State, Zip: _____

Section B: Child Support Received

Child support received by parent(s) of the Earlham College student listed above for all children during 2007. Do not include foster care or adoption payments.

\$ _____

Section C: Signatures

Student Signature _____ Date _____

Parent Signature _____ Date _____

Please Return to:
Earlham College Financial Aid Office
801 National Road West – Richmond, IN 47374-4095

Earlham College affirms its commitment, in all its activities and processes, to treat all people equally without concern for age, gender, sexual orientation, race, nationality, or ethnic origin.
