

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 **for all children in the household** during 2008 by the parents of the Earlham College student named on this form.
Do not include foster care or adoption payments.

\$ _____

Section C: Signatures

Student's Signature _____ Date _____

Parent's Signature: _____ Date: _____

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