



Child Support Documentation Form

*****FORM MUST BE SIGNED AND DATED EVEN IF YOU DO NOT RECEIVE CHILD SUPPORT*****

Applicant Name: _____ **Application #:** _____

If you or a member of your household receives child support, please complete this form.

I, _____, understand that I will be held liable if I have misstated or understated in any way the child supports my household receives.

Please provide the following information grouped by the person providing the household child support.

NONCUSTODIAL PARENT #1

Name of noncustodial parent providing the support: _____

Name of child/children: _____, _____, _____, _____

Please check the appropriate box below:

☐ the household has **NOT** received any child support since _____.

☐ the household has **NEVER** received child support.

☐ the household **DOES** receive child support in the amount of \$ _____ ☐ Weekly ☐ Bi-Weekly ☐ Monthly

Is the Applicant the adult household member that receives this support? ☐ Yes ☐ No

If not, name of other household adult receiving support: _____

NONCUSTODIAL PARENT #2

Name of noncustodial parent providing the support: _____

Name of child/children: _____, _____, _____, _____

Please check the appropriate box below:

☐ the household has **NOT** received any child support since _____.

☐ the household has **NEVER** received child support.

☐ the household **DOES** receive child support in the amount of \$ _____ ☐ Weekly ☐ Bi-Weekly ☐ Monthly

Is the Applicant the adult household member that receives this support? ☐ Yes ☐ No

If not, name of other household adult receiving support: _____

Signature _____

Date _____