

Bringing people together to build homes, community, and hope.

Child Support Verification Form

This form will be sent to the Cabinet for Health and Family Services to verify the receipt and non-receipt of child support when the applicant has children and the other parent is not part of the household.

This form will be used to acquire information from:

Kentucky Cabinet for Health and Family Services Child Support Enforcement CSE.Housing@ky.gov

This portion to be completed by applicant:

	☐ I do not have any children for which I receive child support		
	I have #	_ children for which I receive child support	
	I have #	_ children for which I <u>DO NOT</u> receive child support	
Applic	cant Full Name: _		
Applicant Social Security Number:			
Applicant Full Address:			
****P	Please send recor	rds for the past two years***	
I am a author	pplying for home	ase Information: cownership with Scott/Bourbon Counties Habitat for Humanity, and hereby information regarding any child support cases associated with me, as requested aties Habitat.	
Applic	cant Signature:		