

School Confirmation of Enrollment - Child Attending School

ORS 107.108; OAR 137-055-5110

Student's Full Name: _____
Student ID: _____
Paying Parent: _____
CSP Case #: _____

Must Be Completed by the School

If this school contracts with the National Student Clearinghouse (NSC), the student **must** attach the Enrollment Verification Certificate from the NSC to this form.

1. Is the student enrolled in at least one-half of a fulltime course load as defined by your school?
Yes No
2. Is the student maintaining satisfactory academic progress as defined by your school?
Yes No
3. Has the student provided you with an authorization that gives your school the authority to release academic records regarding the student's enrollment status, academic progress, courses, and grades to the paying parent identified above?
Yes No

_____ Date

_____ Printed Name of Registrar or School Official

_____ Name of School

_____ Signature of Registrar or School Official

_____ School Contact Phone Number

_____ Signature of the Student

Original – DCS

Copy – Paying Parent

Submit completed form through your online account, or send by mail, email or fax to:

Division of Child Support
Child Attending School Team
 4600 25th Ave NE, Suite 180
 Salem, OR 97301
 Telephone: 503-986-5137
 FAX: 503-986-0543
 TTY: 800-735-2900
 E-mail: CAST@doj.state.or.us