

Union College Financial Aid Office / Grant Hall - Third Floor

Occupation:

## Noncustodial Parent Waiver

	STUDENT'S FULL NAME		BIRTHDATE
not be possible. By completing Completion of this form does n submit required financial inform	ne families have extenuating circumstances in whi this form, you are requesting a waiver of required ot guarantee waiver approval. Situations we will mation, unwillingness to provide financial suppor reasons on their own to file this petition. <i>We will</i>	financial documents from your nor NOT consider: Unwillingness of a t for education, or divorce decrees a	ncustodial parent. noncustodial parent to bsolving the
Noncustodial Parent Inf	ormation		
Name:		Telephone:	
Permanent Address:			

Email:

Date of divorce/separation:				
Has the noncustodial parent claimed the student a	No	Yes		
If yes, most recent tax year: Is it a condition of the divorce decre			?	
Has the noncustodial parent ever paid child suppo	ort for the student?	No	Yes	
If yes, most recent tax year:	Annual amount:			
Has the student had contact with the noncustodial parent in the past year?No			Yes	
If yes, please describe (letter/email, visit, phor	ne call/text, school event, social me	edia, etc.):		

## Required Attachments

- > Student Statement of relationship with noncustodial parent
- > Custodial parent statement of student's relationship with noncustodial parent
- Third party letter from a counselor, social worker, teacher or clergy member who can clarify the student's situation. Statements from an attorney and other family members may not be accepted.
- > If pertinent, copies of restraining order, police report, etc.

Certification By signing this form, I certify that the information provided is true and complete to the best of my knowledge.

CUSTODIAL PARENT SIGNATURE

DATE