

Noncustodial Parent Waiver Petition 2017-18

Student Name _____

Stanford ID **OR** Common App ID (prospective students) _____

Permanent Address _____

Email _____

Telephone Number _____

SECTION I: Noncustodial Parent Information

If any of the information that we are asking is not known, please indicate “unknown” or “n/a” in the appropriate blank(s).

Noncustodial Parent Name _____

Occupation _____

Address _____

Email Address _____

1. Marital Status of your natural parents: Never Married Divorced/Separated
 - If divorced/separated, indicate the year of divorce/separation. _____

2. Has your noncustodial parent ever claimed you as a dependent on a federal tax return? Yes No
 - If yes, indicate the most recent tax year that occurred. _____

3. Has your noncustodial parent remarried? Yes No
 - If yes, please indicate the year this occurred. _____

4. Does your noncustodial parent have other children? Yes No
 - If yes, indicate how many _____

5. When was the last time you have had contact with your noncustodial parent? _____
 - What was the nature of the contact (letter, visit, phone call, etc.) _____

6. Did your noncustodial parent pay child support in 2015? Yes No
 - If yes, indicate the total amount he/she paid in 2015 for you: _____
 - For other children: _____
 - If no, indicate the last year that he/she paid child support: _____

SECTION II: Student Statement

Provide a written statement that will help us to better understand the circumstances that you believe make it appropriate for us not to require any financial information or contribution from your noncustodial parent. Be sure to provide as much detail as possible and attach additional pages if necessary.

SECTION III: Third Party Statement (Required)

Attach a statement from a third party (other than an attorney) that verifies the amount of contact you have with your noncustodial parent. Typically, these letters come from counselors, ministers, and other professionals close to a student's situation.

SECTION IV: Sign and Submit

Please send completed form and supporting documents to the Financial Aid Office by one of the following

1. Secure Document Upload, https://psimgduprd.stanford.edu/fao_upload/
2. Fax to (650) 725-0540.

I certify that all information on this form is true and complete to the best of my knowledge.

Student's Signature: _____ Date: _____

Custodial Parent's Signature: _____ Date: _____