

FairfieldUniversity Office of Financial Aid

Noncustodial PROFILE Waiver Appeal Form

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Fairfield University believes that the primary responsibility for education expenses starts with the student and the family. In cases of divorce, separation, and/or nonexistent marital history between biological parents, the parent (and if applicable, step-parent) with whom the student resides, is responsible for completing at the noncustodial parent

College Board: https://cssprofile.collegeboard.org/ . If thics 0 (Form), 554, Cast (h) = 10 (https://cssprofile.collegeboard.org/ .

exception be made to of financial aid, nor does it prevent the accrual of late fees or unpaid student

account balances due the University.

** DEADLINE: MARCH 31 **						
STUDENT SECTION		Academic Year: 20 20				
Last Name	First Na	First Name				
Fairfield ID or SSN	Expected \	Expected Year of College Graduation				
Street Name	City/Town	State	Zip			
E-mail	Phone_	_				
CUSTODIAL PARENT SECTION						
Last Name	First Na	First Name				
Street Name	City/Town	State	Zip			
E-mail	Phone					
OFFICE USE ONLY: NCPAPP	PERSONAL STMTTHII	THIRD PARTY DOCUMENTATION		_		

Noncustodial Parent Waiver Appeal Form Marital Status of biological parents (check applicable): Divorced _ Separated Never Married Other (please explain) *Please submit copy of divorce decree (all pages) Year of divorce/separation/other:_____ **NONCUSTODIAL PARENT SECTION** (Please complete as thoroughly as possible) Last Name First Name Address _____City/Town_____State____Zip Code _____ TAX INFORMATION Check One: Has your noncustodial parent ever claimed you as a dependent on his/her federal tax return? YES NO If YES, please indicate tax year: YES NO Has your noncustodial parent remarried? If YES, please indicate year: FREQUENCY OF CONTACT Have you had contact with your noncustodial parent in the last year? YES NO If YES, please specify the nature of this contact (visit, letter, phone call, email, etc.), including why the contact and/or relationship may have changed since this time: If YES, indicate duration of contact (days, weeks, months, etc.): If NO, indicate the last time you had contact with your noncustodial parent: Month______ Year_____ **CHILD SUPPORT & LEGAL ORDERS** YES NO Did your noncustodial parent pay child support for you in the previous year? \$ /month If YES, indicate amount: If *NO*: indicate the **last year** your noncustodial parent paid child support for you: Are child support payments currently garnished (or have they been) from your noncustodial parent's wages? YES NO

Are there any legal orders that limit your noncustodial parent's contact with you?	YES	NO	
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