2022-23 Noncustodial PROFILE Waiver Request

STUDENT INFORMATION

Student Name		II	ID or SSN	
Permanent Address	street			
	city	state	zip	
E-mail		_ Phone		

NONCUSTODIAL PARENT INFORMATION

Name	Phone			
Permanent Address				
	street			
	city	state	zip	
E-mail	Employer			
Status of student's biological/adoptive parents: \Box Divorced/Separated \Box Never married to each other				
If divorced or separated, indicate year of divorce/separation:				
Has noncustodial parent ever claimed student as a dependent on a federal tax return? \Box Yes \Box No				
If "Yes," indicate most recent year claimed:				

FREQUENCY OF CONTACT

Are there any legal orders that limit the noncustodial parent's contact with the student?
Yes
No

If "Yes," please attach documentation (i.e. restraining order, police report, divorce decree, etc.)

On how many occasions has the student had contact with him/her during the past 12 months? _____

What was the date of the most recent contact?

Please explain the purpose of the contact and whether it was in person, by phone, or other:

CHILD SUPPORT INFORMATION

If "Yes," indicate the total amount he/she paid for student:

If there are other children, indicate total paid for all children:

If "No," indicate the last year that he/she paid any child support: _____

REQUIRED DOCUMENTATION

<u>Personal Statement</u>: Attach a separate page explaining exactly why it is impossible for you to provide the Noncustodial PROFILE. Include a description of the history and current status of your relationship with your noncustodial parent, the history and frequency of any contact you have had with that parent, and a history of any financial support provided for you by that parent. <u>Use multiple sheets of paper if necessary</u>.

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<u>Third Party Support</u>: Attach supporting documentation, such as legal/court documents or a letter from an attorney, member of the clergy, therapist, teacher, guidance counselor, or other non-family member who is familiar with your circumstances and in a position to confirm your explanation of the situation. Be sure that the person writing on your behalf includes his/her name, address, phone number, and relationship to you (the student).

Waiver requests submitted without supporting documentation and/or third party corroboration will be reviewed, but are unlikely to be approved. If you are unable to provide third-party documentation and would like to discuss your circumstances, please contact our office.

CERTIFICATION

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

Student Signature	Date
Custodial Parent Signature	Date
Office Use Only	Officer Initials:
Approved: 🗆 Yes 🗆 No Comments:	