REQUEST FOR WAIVER
OF
NONCUSTODIAL PROFILE/PARENT STATEMENT

It is the policy of Lehigh University, and many colleges nationwide, to require noncustodial parent information (via the Noncustodial Profile/Parent Statement) as part of the review process for all applicants whose natural parents are divorced or separated. However, information you have provided suggests that you may have difficulty in meeting this requirement. Please complete this form and return it to **Lehigh University, Office of Financial Aid, 218 West Packer Avenue, Bethlehem, PA 18015-1588**, so that our committee may review the information and decide whether or not it can grant a waiver in your case.

STUDENT INFORMATION:

Name: _____ SSN: _____

Address: _____

Street City State Zip Code

Email: _____ Telephone: _____

If your custodial parent is remarried, please indicate the date he/she remarried: _____

NONCUSTODIAL PARENT INFORMATION:

Noncustodial Parent Name: _____ Date of divorce or separation: _____

Address: _____

Street City State Zip Code

Occupation: _____ Employer: _____

CHILD SUPPORT INFORMATION:

Amount of child support received for student in 2007: _____ Total received for all other children: _____

If no support was received for student in 2007, indicate year last received and amount: _____

Was there a legal settlement with respect to child support? _____ Attach a copy if yes.

Which parent last claimed the student as a dependent on a federal tax return? _____

CONTACT INFORMATION:

How often have you had contact with your noncustodial parent in the last 12 months? _____

What was the nature of the contact? _____

Is he/she aware of your desire to attend Lehigh University? _____

SUPPLEMENTAL INFORMATION:

When requesting a waiver of the Noncustodial Profile/Parent Statement, you must also include a letter from a third party (other than an attorney or family member) who can confirm the information you are providing. Be sure that the person writing on your behalf includes their name, address, phone number and relationship to the student (teacher/counselor/clergy).

Please feel free to attach a letter to describe any other aspects of your relationship with your noncustodial parent that you believe to be relevant to the committee's waiver decision. All information in our office is treated confidentially.

The information reported on this form is correct and complete to the best of our knowledge.

_____ _____

STUDENT'S SIGNATURE DATE PARENT'S SIGNATURE DATE