

NON-CUSTODIAL PARENT INFORMATION FORM

(Must be completed if only one parent completes the Parents' Financial Statement through School and Student Services)

Applicant's Name: _____ Grade Entering: _____

1. Is the applicant's non-custodial parent deceased? Yes No
(If no, please complete the remainder of this questionnaire.)

2. Are you a single parent by choice (i.e. adoption or fertility treatment)? Yes No
(If no, please complete the remainder of this questionnaire.)

3. Do you know the whereabouts of your child's non-custodial parent? Yes No
If yes, what is the nature and frequency of contact? _____

_____ *If no, what was the last date of contact?* _____

4. Are the applicant's biological parents separated or divorced? Yes No
If yes, do you receive child support? Yes No

If yes, what is the yearly amount received for this child? _____

If yes, please provide a copy of a court document, e.g. divorce decree, custody agreement, legal separation agreement, etc. specifying the role and responsibilities of both parents.

5. Please check one of the two statements below:

I understand that my child's financial aid application will be deemed incomplete until information for the second parent is received. Information for any step-parents in either household is also required. I further understand it is my responsibility to provide additional parent information to Avenues by **the financial aid due date (see below)**.

I request that Avenues waive the requirement of obtaining financial documentation from my child's non-custodial parent. I either do not know the whereabouts of my child's non-custodial parent or do not have contact with him or her. I have provided an explanation below, as well as letter of verification from a third-party (e.g., a school counselor, attorney, clergyperson, colleague, employer or other non-relative) explaining and confirming the nature of the relationship between the child and the non-custodial parent.

Third-Party Verification provided by:

Name

Title/Position

Relationship to Applicant

Custodial Parent's Request for Waiver Statement:

Please use the attached page or attach a separate letter. Make sure to sign and date your statement.

I attest that all the information provided is true and accurate. I understand that misrepresentation of the information requested could lead to a revocation of any financial aid grants awarded.

Signature of Custodial Parent: _____ Date: _____

Applicant's Name: _____

Grade Entering: _____

Custodial Parent: _____

Request for Waiver Statement:

FINANCIAL AID APPLICATION DEADLINES

Returning Families: November 1, 2020
 First Choice Round Deadline: November 23, 2020
 Regular Notification Deadline: January 8, 2021

Signature of Custodial Parent: _____ Date: _____

Please email all letters to financialaid@avenues.org, or mail to:

Financial Aid Office, Attn: Chequanna Kelley
 Avenues New York
 259 Tenth Avenue
 New York, NY 10001-7020