SUMMER ACADEMY at PENN

NONCUSTODIAL PARENT FINANCIAL INFORMATION FORM (US CITIZENS & PERMANENT RESIDENTS)

The noncustodial parent should complete this form and return it to ESAP. Penn requires financial information from both parents, even when they are divorced or separated, to determine a student's financial need. Information collected on this form will be kept confidential.

Please submit a copy of your most recent Tax Forms and wage statements (2016)

Mail your financial aid form and supporting materials to: ATTN: ESAP 220 South 33rd St. 109 Towne Building Philadelphia, PA 19104-6391

To expedite the process email to esap@seas.upenn.edu or fax to 215-573-5577

Se	ection A: Student Informati	on			
Student's Name:			Soci	al Security Number	
			\Box with father	\Box equally with mother and father	
Se	ection B: Noncustodial Pare	nt Information			
1.	Relationship to student	□ mother	□ father		
2.	Name				
3.	Date of birth				
4.	Address		City	Province	
5.	Email				
6.	Daytime Phone				
7.	Will you attend a college or	university at least or	e term during the 2016-20	017 academic year?	
	□ No □ Y	es If yes, indicate th	ne name of school		
8.	Indicate if you are \Box se	lf-employed	□ employed	□ unemployed	
	Occupation		Employer		
	Number of years with current	nt employer			
	If unemployed, the date une	mployment began			
Se	ection C: Household Inform	ation			
9.	What is your current marital	l status? 🛛 🗆 neve	r married 🛛 remarried	\Box separated \Box divorced \Box widowed	
10). If you have remarried, com	plete the following in	nformation:		
	a. the date of your man	rriage			

b. your spouse's name _____

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c.	your spouse	's occupation		employe
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d. will your spouse be attending college at least one term during the 2017-2018 academic year?

□ No □ Yes If yes, indicate the name of the school _____

11. List the people in your family. Include yourself, your spouse if you are remarried, the student, and other children under the age of 24 whom you share with the student's custodial parent, even if they do not live with you. Include anyone else who lives with you and receives more than half of his or support from you.

Age	Check	Name of Present School or	Year in	Tuition and	Room and	Scholarships	Parental	Name of	Type	e of Institu	ution	Check
0-									71			if Full
												Time
									Public	Private	College	
	,										8-	
	Age	Age Check if living with family	if College living with	if College School/ living College with	if College School/ Fees living College with	if College School/ Fees Board living College with	if College School/ Fees Board or Gift Aid living College with	if College School/ Fees Board or Gift Aid Support living College with College	if College School/ Fees Board or Gift Aid Support Institution to be living with College College Does Does	if College School/ Fees Board or Gift Aid Support Institution to be living with family College College Fees Board or Gift Aid Support Institution to be training College College Fees Board or Gift Aid Support Institution to be training Fees College Fees Board Fees Fees	if College School/ Fees Board or Gift Aid Support Institution to be living with College College Attended Toward Attended family Fees Fees Fees Fees Fees Fees	if College School/ Fees Board or Gift Aid Support Institution to be living with College College Fees Board or Gift Aid Support Institution to be family Fees College Fees Board or Gift Aid Support Institution to be family Fees College Fees Fees Fees Fees Fees

Section D: Expenses

12. Total annual child support you and your spouse paid or will pay in 2016 \$	Estimated for 2017 \$				
13. Repayment of you and your current spouse's educational loans in 2016 \$	_Estimated for 2017 \$				
14. Uninsured medical and dental expenses in 2016 \$ Estimated for 2017	\$				
Section E: Financial Support of Former Household					
15. Who will claim the student as a dependent on the 2016 income tax return? \Box mother	□ father □ neither parent				
16. Annual child support paid for the student in 2016 \$ Estimated for 2017 \$					
17. According to court order, when will (did) the student's child support end?	-				
18. Annual child support paid for all children in 2016 \$ Estimated for 2017 \$	S				
19. Annual alimony paid in 2016 \$ Estimated for 2017 \$					
20. How much did you contribute toward the student's education, excluding child support, in	n the 2016-17 academic year? \$				
21. How much do you plan to contribute toward the student's education in 2017-18? \$					
22. Is there an agreement specifying this contribution for the student's education? \Box	Yes 🗆 No				

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Section F: Noncustodial Parent's (and spouse's, if remarried) Income and Benefits

		2016	2017 (estimate)
23. Tax	able income received from any of these sources	\$	\$
a. V	Wages, salaries, tips	\$	\$
b. 1	Interest income	\$	\$
c. I	Dividend income	\$	\$
d. (Other taxable income	\$	\$
		\$	\$
24. Nor	n-Taxable Income and Benefits		
		\$	\$
25. Tot	al taxable and Non-Taxable Income and Benefits		
26. Cre	dits:		
a. I	Pension Plan Contribution	\$	\$
b. 1	Employment Insurance Premiums	\$	\$
c. /	Allowable Medical Expenses	\$	\$
27. Tax	765		
	Federal Income Tax	\$	\$
	State Tax	\$	\$
	Total taxes	\$	\$
		Ψ	Ψ
Secti	on G: Estimated 2017 Income and Benefits		
28	income you will earn from work	¢	
		ወ ድ	
U. 1	income your spouse will earn from work	ቅ ¢	
		Ø	

\$_____

29. Other taxable income

30. Untaxed income and benefits

Section H: Noncustodial Parent's (and spouse's if married) Assets

If your spouse owns more than 50% of any of these assets, provide details on a separate sheet

31.	Total cash, checking and savings accounts as of today	\$ \$
32.	a. Total value of assets held in the names of you and your spouse's children who are under 19 and not college students. Do not include the student.b. Total value of assets held in prepaid tuition plans for you and your	\$
	spouse's children. Do not include the student.	\$
	c. Total value of assets held in prepaid tuition plan for the student.	\$ \$
33.	Investments	
	Total value of stocks, bonds, savings bonds, mutual funds, C.D.s, money market funds, and all other investments except real estate.	\$
	······································	\$
34.	Primary home (If you rent, check here and skip to 34e)	+
	a. What is it worth today	\$
	b. Amount owed	\$
	c. Year purchased	\$
	d. Purchase price	\$
	e. Monthly mortgage or rent payment	\$
35.	Real estate (other than your primary home)	
	a. What is it worth today?	\$
	a. Amount owed	\$
	b. Year purchased	\$
	c. Purchase price	\$
36.	Do you or your spouse own all or part of a business or farm?	
	\Box no \Box yes, a farm \Box yes, a business	
	If you answered yes	
	a. Percentage of ownership:	¢
	b. What is it worth today?	ð
	c. What is owed on it?	\$

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Section I: Special Circumstances and Explanations

Please attach additional pages if necessary to explain any unusual expenses such as high medical or dental expenses, educational and other debts, child care, elder care, or special circumstances in your family

Section J: Certification and Authorization

We understand that the information provided on this form will be used to determine an estimate of the applicant's financial aid eligibility for ESAP and does not guarantee an official financial aid award. We hereby certify that the information presented on this application is correct at this time.

Signature of noncustodial parent_____ Date:_____