

ENGINEERING

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 (2017). All forms should be combined into one file and uploaded onto the student's CollegeNet application dashboard (after the program application has been submitted).

If you have additional questions, email Engineering Summer Academy at Penn at: esap@seas.upenn.edu

Section A: Student Information

Student's Name: _____ Social Security Number _____

Student's primary residence is: with mother with father equally with mother and father

Section B: Noncustodial Parent 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 one term during the 2017-2018 academic year?

No Yes If yes, indicate the name of school _____

8. Indicate if you are self-employed employed unemployed

Occupation _____ Employer _____

Number of years with current employer _____

If unemployed, the date unemployment began _____

Section C: Household Information

9. What is your current marital status? never married remarried separated divorced widowed

10. If you have remarried, complete the following information:

a. the date of your marriage _____

b. your spouse's name _____

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- c. your spouse's occupation _____ employer _____
- 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.

Name	Age	Check if living with family	Name of Present School or College	Year in School/ College	Tuition and Fees	Room and Board	Scholarships or Gift Aid	Parental Support Toward Educational Expenses	Name of Institution to be Attended	Type of Institution			Check if Full Time
										Public School	Private School	College	
1													
2													
3													
4													
5													
6													

Section D: Expenses

12. Total annual child support you and your spouse paid or will pay in 2017 \$ _____ Estimated for 2018 \$ _____
13. Repayment of you and your current spouse's educational loans in 2017 \$ _____ Estimated for 2018 \$ _____
14. Uninsured medical and dental expenses in 2017 \$ _____ Estimated for 2018 \$ _____

Section E: Financial Support of Former Household

15. Who will claim the student as a dependent on the 2017 income tax return? mother father neither parent
16. Annual child support paid for the student in 2017 \$ _____ Estimated for 2018 \$ _____
17. According to court order, when will (did) the student's child support end? _____
18. Annual child support paid for all children in 2017 \$ _____ Estimated for 2018 \$ _____
19. Annual alimony paid in 2017 \$ _____ Estimated for 2018 \$ _____
20. How much did you contribute toward the student's education, excluding child support, in the 2017-18 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? Yes No

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

	2017	2018 (estimate)
23. Taxable income received from any of these sources	\$ _____	\$ _____
a. Wages, salaries, tips	\$ _____	\$ _____
b. Interest income	\$ _____	\$ _____
c. Dividend income	\$ _____	\$ _____
d. Other taxable income	\$ _____	\$ _____
24. Non-Taxable Income and Benefits	\$ _____	\$ _____
25. Total taxable and Non-Taxable Income and Benefits	\$ _____	\$ _____
26. Credits:		
a. Pension Plan Contribution	\$ _____	\$ _____
b. Employment Insurance Premiums	\$ _____	\$ _____
c. Allowable Medical Expenses	\$ _____	\$ _____
27. Taxes		
a. Federal Income Tax	\$ _____	\$ _____
b. State Tax	\$ _____	\$ _____
c. Total taxes	\$ _____	\$ _____

Section G: Estimated 2018 Income and Benefits

28. a. income you will earn from work	\$ _____
b. income your spouse will earn from work	\$ _____
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 <input type="checkbox"/> 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?	
<input type="checkbox"/> no <input type="checkbox"/> yes, a farm <input type="checkbox"/> yes, a business	
If you answered yes	
a. Percentage of ownership: _____	
b. What is it worth today?	\$ _____
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: _____