

**Champlain College 2009-2010
Divorced/Separated Parent's Statement**



To Be Completed By the Non-Custodial Divorced or Separated Parent

Student Applicant's Name _____

Student ID _____

Section A: Statement of Parental Support

2007

2008

2009

Yes No

Yes No

Yes No

Applicant lived or will live with me for more than Six weeks during:

Applicant received or will receive more than \$1,600 From me (include child support) in:

Applicant was or will be claimed by me in:

If you answered "YES" to **any** of the questions in **Section A**, please complete Sections B, C, and D and return this worksheet to our office.

If you answered "NO" to **all** of the above questions, please **sign** this worksheet and return to our office.

Section B: Parent's Information

Name: _____

Telephone: _____

Address: _____

State of Legal Residence: _____ Age: _____ Current Marital Status: _____

Child support **paid** for all children in 2008: \$ _____

Child support **paid** for the student in 2008: \$ _____

When will (did) student applicant's support end? _____

What do you expect to contribute to the student applicant's education in addition to child support during the 2009-2010 academic year? \$ _____

Indicate the total number of people who will live with you and for whom you will provide more than half support between 7/1/09 and 6/30/10. Include yourself and spouse, if remarried, but do not include applicant:

Full Name	Age	Relationship	College Attending 2009-2010
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

(Over)

Section C: Parent's (and Current Spouse's) Income and Expenses for 2008

Please attach complete copy of your 2008 Federal Income Tax Return, including all schedules and W-2 Forms.

	Parent	Spouse
Wages, salaries, tips	\$ _____	\$ _____
Interest Income	\$ _____	\$ _____
Dividends	\$ _____	\$ _____
Net income (or loss) from Business or	\$ _____	\$ _____
Adjustments to income	\$ _____	\$ _____
All other taxable income	\$ _____	\$ _____
Untaxed Social Security benefits	\$ _____	\$ _____
All other income (child support, welfare , etc.)	\$ _____	\$ _____
Medical & dental expenses not paid by insurance	\$ _____	\$ _____

Section D: Parent's Assets

IF YOU ARE MARRIED AND SOME ASSETS ARE OWNED JOINTLY, PLEASE INDICATE THE AMOUNT THAT REFLECTS ONLY **YOUR** SHARE.

	Present Market Value	Present Debt
Home	\$ _____	\$ _____
Other real estate	\$ _____	\$ _____
Investments	\$ _____	\$ _____
Business/Farm	\$ _____	\$ _____
Cash, savings, checking	\$ _____	\$ _____

I declare that the information on this form is true, correct and complete to the best of my knowledge, and I agree to provide, if requested, any other official documentation necessary to verify information reported.

Do you authorize the college to discuss the information outlined on this form with the student applicant?

Yes No

Parent's Signature

Date