

**For Official Use Only****NCP_ST Status:****2022-2023 Non-Custodial Parent Statement***(To be completed by the Non-Custodial Parent)***Student Name:** _____ **Student ID:** _____**Non-Custodial Parent**

Name: _____ Date of Separation: _____

Address: _____ Date of Divorce: _____

_____ If divorce is not final, have you filed? Yes _ No _

Home telephone: (_____) _____ If yes, date filed: _____

Daytime telephone: (_____) _____ Who claimed this student on the most recent Federal

Income Tax return? _____

1. Financial Assistance to Custodial Parent and Children in 2020

| | |
|--|----|
| Child support paid for <u>all</u> children | \$ |
| Child support paid for this student | \$ |
| Alimony paid | \$ |
| Contribution to custodial parent's household expenses (utilities, rent, mortgage, insurance, etc.) | \$ |
| Amount you expect to contribute to this student's educational expenses for the 2022-2023 academic year (do not include child support in this figure) | \$ |

2. Income and Expenses in 2020

| | Amount in 2020 |
|--|----------------|
| Income Earned from Work: 1040 line 1 + Schedule 1 line 3 + Schedule 1 line 6 + Schedule K-1 (Form 1065) Box 14, Code A | \$ |
| Adjusted Gross Income | \$ |
| Untaxed Social Security Benefits | \$ |
| Worker's compensation | \$ |
| Federal Income tax paid | \$ |

3. Assets

Current value of cash, savings, and checking accounts \$ _____

Are you self-employed? Yes No If Yes, please complete the table below.

Name of Business: _____ Type of Business Return Filed: 1065 1120S 1120 Schedule C

| Name of all owners | % owned by this owner | Relationship to you | Your \$ share of value of business | Your \$ share of debt of business | # of FTE Employees |
|--------------------|-----------------------|---------------------|------------------------------------|-----------------------------------|--------------------|
| | | | \$ | \$ | |
| | | | \$ | \$ | |
| | | | \$ | \$ | |

If there is more than 1 business, please include these details on a separate page. Include student ID and name on page.

4. Property Information

| Property Description | Principal Residence | Other 1* | Other 2* |
|------------------------|--|----------|----------|
| | <input type="checkbox"/> Rent <input type="checkbox"/> Own (check one) | | |
| Address | | | |
| Current resale value | | | |
| Balance of mortgage(s) | | | |
| Year of purchase | | | |
| Purchase price | | | |
| Monthly payment | | | |

*Other 1, 2 includes investment properties, vacation homes, time shares, land, and/or commercial properties. Please attach a separate sheet of paper to list additional properties. Business property reported on a business tax return should not be included on this grid, but should be reported in Section 3.

5. Household Information

(Please only include people that live in your household more than 50% of the time)

| Name | Age | School/College attending in 2022-2023 | Grade |
|------|-----|---------------------------------------|-------|
| 1. | | | |
| 2. | | | |
| 3. | | | |
| 4. | | | |
| 5. | | | |
| 6. | | | |
| 7. | | | |
| 8. | | | |

Comments:

Signature/Authorization

Non-Custodial Parent Signature: _____ Date: _____

I authorize the College to discuss this information with the student - Yes ___ No ___

I authorize the College to discuss this information with the custodial parent - Yes ___ No ___

Please return within 10 days of request in PDF format to finaid@stonehill.edu (enter Student name and Stonehill ID in subject line) or mail to Student Financial Assistance, Stonehill College, 320 Washington Street, Easton, MA 02357. Photographed documents sent via email will not be accepted.