Confirmation of Single-Parent Status – 2017-18

In order to determine a student’s eligibility for institutional financial aid, Colgate University requires financial information from each of the student’s biological or adoptive parents, if living. If for one of three reasons* it is impossible to submit financial information for both parents (* please see the check boxes noted below), the primary parent or guardian should complete this form and submit a supporting letter or certificate that meets all of the following criteria:

1. signed by a 3rd party not employed by the family, but with professional knowledge of the family’s situation – for example, we can accept a letter or certificate from a Dept. of Vital Records or other government agency, from an adoption agency or fertility clinic, or from a physician, guidance counselor, clergyperson, social worker, teacher, coach, etc.; letters from family members and friends may not be used to satisfy this requirement;
2. printed on the signer’s official form or professional letterhead, or sent from an e-mail account that includes the relevant school’s, organization’s, or agency’s name;
3. includes the signer’s contact information and, if applicable, his/her relationship to the student; and
4. confirms that the primary parent or guardian is (or was, in the case of re/marriage) the sole biological or adoptive parent or guardian.

This form is not required for applicants requesting federal aid only.

* Please select the circumstance below that most accurately describes your family’s situation:

☐ An adoptive parent was single at the time of the student’s adoption;
☐ A biological parent was single at the time of the student’s conception via IVF with a surrogate mother or an anonymous sperm donor.
☐ A biological mother was single at the time of the student’s conception, and father’s name did not appear on student’s original birth certificate).

Student Information
Name: ____________________________  Colgate ID# (i.e., portal user name): ________________
Permanent Address: _________________________________________________________________
E-mail Address: ____________________________  Telephone #: ____________________________
(including area code)

Primary Parent/Guardian Information
Name: ____________________________________________
Relationship to student: __________________________
Permanent Address: ____________________________
(if different than student’s)
E-mail Address: ____________________________  Telephone #: ____________________________
(including area code)
Other Information

What is the marital status of the student’s biological/adoptive parents relative to each other?

☐ Never married  ☐ Not applicable (as in the case of single-parent adoption or conception via IVF)

☐ Other (or explanation): __________________________________________________________________________
_______________________________________________________________________________________________

Is the student’s primary biological/adoptive parent or guardian currently married?

☐ Yes  ☐ No

If yes, please indicate spouse’s name: ______________________________________________________________

Year of re/marriage? ______________

If not married, is the student’s primary biological/adoptive parent or guardian currently in a committed relationship (e.g., civil union, domestic partnership, common-law marriage, cohabitation arrangement, etc.) with someone who lives in the household?

☐ Yes  ☐ No

If yes, please indicate partner’s name: ______________________________________________________________

How long have the primary biological/adoptive parent and partner shared a household? _______________

Certification

I certify that the information provided on this form is true and complete to the best of my knowledge.

Student Signature: ____________________________________________ Date: __________

Parent/Guardian Signature: __________________________________ Date: __________

Please feel free to submit, along with this form and third-party documentation, any additional information that you believe will help us better understand your family situation.

The required third-party letter or certificate need not necessarily be sent together with this completed form and other supporting documents; but all materials relating to this matter should include the student’s name and Colgate ID# (i.e., portal user name) and should either be

faxed to: 315-228-7050  e-mailed to: finaid@colgate.edu

OR mailed to: Office of Financial Aid
Colgate University
13 Oak Drive
Hamilton, NY 13346

Please send only 1 copy of required materials.