

## **Parent Information Sheet**

We recognize that every family is different and want to be sure we understand the full context of your family's circumstances as we assess your financial aid eligibility. Please help the Financial Aid Office better understand your family situation so that we can be as generous as possible as we calculate your need for aid.

Step 1: Student/Household Information		
	e of birth:/	
Student's Permanent Address:		
Please list the head(s) of household in this home and their relation	to you (biological parent, step-parent, a	doptive parent, legal
guardian, grandparent, e.g.):	, , , , , , , , , , , , , , , , , , , ,	
	tion to you:	
	tion to you:	
If there is a separate household in which a biological or adoptive p	arent resides, please list the address her	e:
Please list the head(s) of household in this home and their relation	to you:	
	tion to you:	
Name: Relation to you:		
Are you able to ask/do you expect each of your biological or adopt	ive parents to participate in the financial	aid process here at
Harvard?	pro-	,
☐ YES — This form is complete. Please go to <b>Step 3</b> (on bac	k) for how to submit.	
□ NO – Please tell us about the parent you are not able to		
Step 2: Parent Information		
Parent Name: Ema	il address:	
Occupation: Pho	ne number:	
	- Di - 1/0 1	
Marital status of your biological parents:	☐ Divorced/Separated	☐ Never Married
If divorced/separated, indicate the year of divorce/separa	ition:	
Has this parent remarried?	□ YES	□NO
If yes, please indicate the year of remarriage:		
Does this parent have other children?	□ YES	$\square$ NO
If yes, please indicate how many:		
Have you had contact with this parent in the last year?	☐ YES	□NO
If no, please indicate the last time you had contact with h	-	
If yes, please state the nature of the contact (letter, visit,	pnone, etc):	
Has this parent paid child support in the last 2 years?	□ YES	□NO
If yes, please indicate the amount paid for you:		
for other children:		
If no, please indicate the last year that he/she paid child s		
Does this parent know you are applying to Harvard College?	□ YES	□NO
Do you expect this parent to be at your high school graduation?	□ YES	□ NO
Do you expect this parent to be at your high school graduation:	□ 1 <b>LJ</b>	□ 1 <b>1</b> 0

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Harvard College Griffin Financial Aid Office (ph) 617.495.1581

## **Parent Information Sheet**

## **Step 2: Parent Information (cont.)**

to participate in our financial aid process.

Please check any of the following that	apply to this parent:
☐ This parent is deceased	
☐ I have never met this parent	
<ul> <li>This parent is incarcerated</li> </ul>	
☐ There is a history of verbal/er	notional abuse with this parent
☐ There is a history of physical a	buse with this parent
☐ There is a restraining order in	place against this parent
Please provide a detailed statement in	the space below explaining the history of the nature of your relationship with this parent.
Please provide any information that w	ould help us to better understand the circumstances around which you cannot ask him or her

<u>Please attach a statement from a third party</u> (other than an attorney or family member) that verifies the amount of contact that you have had with this parent. Typically, these letters come from counselors, ministers, teachers, or other professionals close to your personal situation. Please also include any applicable documentation to substantiate or expand upon your situation such as court rulings.

<u>Please note:</u> Harvard financial aid eligibility is based on demonstrated financial need, not on a parent's willingness to pay for education. We review each student's family circumstances on a case-by-case basis in order to best understand what information and documentation is appropriate to collect within a particular student's family context while also ensuring fair and consistent treatment for students in similar situations.