

Financial Aid 711 E Boldt Way Appleton, WI 54911 (920) 83 2-65 83 financial.aid@lawrence.edu

2024-2025 SECONDARY PARENT FORM WAIVER

The "Secondary Parent" is the parent whose information is not reported on the FAFSA. At Lawrence, financial information is required from both birth parents to determine a student's eligibility for need-based financial aid.

In certain circumstances, Lawrence University will consider Form in the event the required information cannot reasonably be we waive the requirement to obtain information from your Secondary Parent. we waive the requirement to obtain information from your Secondary Parent.

A. STUDENT INFORMATION

	Student Name	LAWRENCE ID OR D.O.B		
В.	STATUS OF BIOLOGICAL/ADOPTIVE PARENTS			
	1) Marital status of biolog ical/adoptive parents:			
Never Married to Each Other & Do Not Share the Same Household				
	Divorced/Separated Year of Separation/E	Divorce:		
	2) Is your Secondary Parent currently married?	Unknown No Yes What year?		
	3) Does your Secondary Parent have other children?	Unknown No Yes How many?		
C.	SECONDARY PARENT'S INFORMATION If any of the following information is not known, writ Relationship to Student Mother Father LAST NAME	e "Unknown" in the space provided		
	OCCUPATION EMPI	PLOYER		
D.	CHILD SUPPORT & LE GAL ORDERS Did the Secondary Parent pay child support in 2022 or 2023	e Secondary Parent pay child support in 2022 or 2023?		
	Child support paid for the student in mo st re	recent calendar year:		
	Child support paid for other children in most rec	cent calendar year:		
	Support was paid: Voluntarily P	Jursuant to Court Order Wage Garnishment		
	No			
	Last year they paid any child support:			

E. FREQUENCY OF CONTACT

1) Has the student had contact with the secondar	y parent in the past year?		
Yes			
How often does the student have contact with the secondary parent?			
What is the nature of the contact? Phone	Email Text Visit		
No			
Date of last contact:			
2) Are there any legal orders that limit the secondary parent's contact with the student?			
F. PERSONAL STATEMEN T			

In the space below, you must provide a personal statement regarding your relationship with your Secondary Parent.

G. CERTIFICATION

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

STUDENT SIGNATURE	DATE	

PRIMARY PARENT SIGNATURE

Retur n completed form to the Lawrence University Financial Aid Office

via one of the following methods:

Secure Upload	Email	Mail
lawrence.leapfile.net (Location: Financial Aid)	financial.aid@lawrence.edu	Financial Aid Office Lawrence University 711 E Boldt Way Appleton, WI 54911

DATE