

Office of Student Financial Aid & Planning

2026-2027 Supplemental Financial Aid Form – Non-Custodial Parent

Students applying for school need-based financial aid, their spouses (if applicable), and their parents are required to complete all sections, attach requested documentation, and sign this form. Your file will not be considered complete nor can any awards be made until all forms are completed, signed, and received by the Office of Student Financial Aid & Planning. This includes complete 2025 tax forms. Keep copies of all forms you submit for your records. **Financial aid renewal is not automatic. Students must reapply for financial aid each year in which they would like to be considered for assistance.**

1. Complete the entire application. Do not leave any questions blank. If a question does not apply, note “N/A” in the space provided. Questions left blank will delay the review of your file.

- Students who are completing a separate Supplemental Financial Aid Form for their other parent need only complete Section 1 on this Form, and not the rest of the student/spouse questions. Please be sure that your parent(s) complete all of their information, and sign the application. **Please send completed form to cumc-sfp@cumc.columbia.edu.**

2. 2025 U.S. Federal or Foreign Tax Returns must be submitted by April 15, 2026.

- **Student, spouse (if applicable) and parent(s) signed 2025 tax returns, including all schedules and W-2s:** Submit a signed copy of IRS 1040 or translated foreign income tax return with all schedules and W-2 forms. If you or your parent(s) file taxes electronically, the filer must still submit a signed copy (in ink) of the tax return. The website for submission is not yet live. We will let the student know when our website is updated for 2026-2027.
- Students planning to marry during the 2026-2027 academic year will need to submit intended spouse’s information and taxes
- **Non-tax Filer:** If you, your spouse, and/or your parents are not filing tax returns for 2025, please complete the “Why I Did Not File a Tax Return” form available on our website. We will let students know when our website is updated for 2026-2027.

1. Student General

Student Name _____

CU ID _____

Graduation Year _____

Student Marital Status: Single Married Divorced/Separated Widowed

Spouse’s Name _____ Date of marriage or planned date of marriage ____/____/____

2. Parent General

Are your biological/adoptive parents:

married separated divorced unmarried living together unmarried living separately widowed

Non-Custodial Parent One

Non-Custodial Parent Two

Father Stepfather Legal guardian
 Mother Stepmother Other

Father Stepfather Legal guardian
 Mother Stepmother Other

Name _____

Name _____

Address _____

Address _____

Telephone (____) _____

Telephone (____) _____

Email _____

Email _____

Non-custodial Parent:

Year of separation: _____

Year of divorce: _____

3. Household Income

2025 Year Income

Anticipated 2026 Year Income

Student Earned Income	\$ _____	Student Earned Income	\$ _____
Spouse Earned Income	\$ _____	Spouse Earned Income	\$ _____
Other Taxable Income	\$ _____	Other Taxable Income	\$ _____
Untaxed Income and Benefits	\$ _____	Untaxed Income and Benefits	\$ _____

2025 Year Income

Anticipated 2026 Year Income

Parent 1 Earned Income	\$ _____	Parent 1 Earned Income	\$ _____
Parent 2 Earned Income	\$ _____	Parent 2 Earned Income	\$ _____
Other Taxable Income	\$ _____	Other Taxable Income	\$ _____
Untaxed Income and Benefits	\$ _____	Untaxed Income and Benefits	\$ _____

4. Amounts and Sources of Untaxed Income

List the total amounts of all sources of untaxed income received and not reported on a 2025 tax return.

	Student/Spouse	Parent(s)
Income Earned from Work (if return not filed)	Amount \$ _____ Source _____	Amount \$ _____ Source _____
Aid to Families with Dependent Children (AFDC)	Amount \$ _____ Source _____	Amount \$ _____ Source _____
Housing and Other Living Allowances	Amount \$ _____ Source _____	Amount \$ _____ Source _____
Other (Specify source)	Amount \$ _____ Source _____	Amount \$ _____ Source _____
Other (Specify source)	Amount \$ _____ Source _____	Amount \$ _____ Source _____
Other (Specify source)	Amount \$ _____ Source _____	Amount \$ _____ Source _____

5. Assets

Student/Spouse

Parent(s)

Cash and Savings	Value at start of 26-27 Academic Year \$ _____	\$ _____
Trusts	\$ _____	\$ _____
Investments, including Stocks, Bonds, CDs, etc. (Do not include retirement savings such as pension plans, 401K, 403B, etc.)	\$ _____	\$ _____
Retirement Savings (Pension plans, 401K, 403B, etc.)	\$ _____	\$ _____
Housing	If you own your home, please list the market value, original purchase price and mortgage loan balance in section 8 below.	Parent housing please complete table below

This section to be completed by parent only.

Housing Status Own Monthly Mortgage Amount \$ _____ Rent Monthly Rent Amount \$ _____ Other (Explain) _____	Fair Market Value of Home \$ _____	Primary Mortgage Loan Balance \$ _____ Date _____
	Purchase Price \$ _____	Secondary Mortgage Loan Balance \$ _____ Date _____
	Year Purchased _____	Home Equity Line of Credit Balance \$ _____ Date _____
Other Real Estate Address _____ Street _____ City _____ State _____ Zip _____	Fair Market Value of Real Estate \$ _____	Primary Mortgage Loan Balance \$ _____ Date _____
	Purchase Price \$ _____	Secondary Mortgage Loan Balance \$ _____ Date _____
	Year Purchased _____	Home Equity Line of Credit Balance \$ _____ Date _____
Other Real Estate Address _____ Street _____ City _____ State _____ Zip _____ (If more than two, indicate additional property information as an additional attachment)	Fair Market Value of Real Estate \$ _____	Primary Mortgage Loan Balance \$ _____ Date _____
	Purchase Price \$ _____	Secondary Mortgage Loan Balance \$ _____ Date _____
	Year Purchased _____	Home Equity Line of Credit Balance \$ _____ Date _____
Parent Business/Farm (Check all that apply)	Business Value	Business Debt
Schedule C Sole Proprietorship* _____ % of ownership _____ # of employees _____	\$ _____	\$ _____
Partnership* _____	\$ _____	\$ _____
S Corporation* _____	\$ _____	\$ _____
C Corporation* _____	\$ _____	\$ _____
Farm* _____	\$ _____	\$ _____

*Submit corresponding tax return.

6. Family Information

In the family grid below, please list the name, age, and relationship for each family member living in your household. **You should always include yourself, spouse (if applicable), parents and your dependent children.** Also, include siblings and other relatives for whom you and/or your parents will be providing more than half of their support from July 1, 2026 to June 30, 2027.

	Name	Age	Relationship to Student
1.			Self
2.			
3.			
4.			
5.			
6.			

Check here if there are more than six family members and list in section 8.

Will any of the above family members (besides your parents) attend college in the 2026–2027 academic year? If yes, provide the following information for each family member. Include college information only if enrolled full-time in a degree granting program. Verification of sibling(s) enrollment in college for the 2026–2027 academic year will be required in September 2026. Adjustments will be made for siblings whose attendance plans change from the time you complete this.

First and Last Name of Family Member	Relationship	Age	Name of College	Undergrad or Grad
1. Student				
2.				
3.				
4.				

7. Outside Scholarship/Resource Information

Please list the name and annual amount of any outside scholarship or tuition benefit that you have been awarded for the 2026–2027 academic year. Be sure to indicate if the scholarship is renewable for future years. Attach a copy of the notification/award letter.

Name of Scholarship or Resource	Source/Agency	Amount for 2026–2027	Renewable	
1.			<input type="checkbox"/> yes	<input type="checkbox"/> No
2.			<input type="checkbox"/> yes	<input type="checkbox"/> No
3.			<input type="checkbox"/> yes	<input type="checkbox"/> No

8. Additional Information and Special Circumstances

Use the following space to answer any questions more completely or to explain any special circumstances you wish to bring to the attention of your Financial Aid Officer. Please be as specific as possible, including dates, dollar amounts, and provide documentation when appropriate.

9. Statements and Signatures

I, the student, we, the parents, and student's spouse (if applicable) certify that all information presented is correct at this time and that I/we will send timely notice of any significant change in my/our family situation, family income or assets, or upon receipt of other scholarships or grants.

The student and at least one parent (and the student's spouse, if applicable) must sign this form. Typed signatures are not accepted.

Student's Signature _____ Parent's Signature _____

Date _____ Date _____

Spouse's Signature _____ Parent's Signature _____

Date _____ Date _____