



2020-2021 Parent Refusal to Complete FAFSA Form
Form must be notarized

Student Name: \_\_\_\_\_ CCCC ID: \_\_\_\_\_

You indicated on the Free Application for Federal Student Aid (FAFSA) that you are unable to provide parental information. If you cannot obtain parental information, and you want to be considered for a Federal Direct Unsubsidized Stafford Loan, you and your parent must complete and sign all sections below. Upon completion, submit this form to the CCCC Financial Aid Office for review.

I \_\_\_\_\_, the parent of \_\_\_\_\_, do hereby attest that the following statements are true:

I and/or my spouse, (if married), have ceased providing any financial support to the student as of \_\_\_\_\_(date support ceased).

- Student does not currently live with a parent.
I (we) will not provide financial support in the future.
I (we) have not claimed the student on either 2018 or 2019 tax returns.
I (we) do not provide coverage under a family health insurance plan, provide coverage under the family auto insurance plan, or provide non-cash support such as free room and board for even short periods of time.
I (we) understand that providing parental information on the FAFSA in no way obligates me (us) to provide any financial support to my child in his/her pursuits of higher education, yet I am still refusing to complete the FAFSA and provide parental information.

In witness whereof I have unto signed my name: this \_\_\_\_\_ day of \_\_\_\_\_.

Parent's signature Parent's Printed name

Sworn before me this \_\_\_\_\_ day of \_\_\_\_\_.

Notary Signature and Stamp

Your signature below indicates that you are affirming that your parents refuse to complete the FAFSA, have ceased to provide financial assistance including health and auto insurance, support for bills or living expenses, do not provide free room and board for even short periods of time, and no longer shall provide any support in the future.

Student's signature Date