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Student ID number

## 2021-2022 Document of Non-Parental Support Exclusion of Parent Information on FAFSA

Based on the results of your Free Application for Federal Student Aid (FAFSA), you did not report information about your parent(s). You indicated that your parent(s) is/are not financially supporting you, nor will be supporting you financially in the future.

| Name            |   |                             |                   |                      |          |  |
|-----------------|---|-----------------------------|-------------------|----------------------|----------|--|
|                 | Last  | First                       |                   |                      | Middle   |  |
| Address         |   |                             |                   |                      |          |  |
|                 | Street Address  | Apt. #                      | City              | State                | Zip Code |  |
| Date of Birth _ |   | Email Address               |                   |                      |          |  |
| Primary Phone   | Number  | Altern                      | ate Phone Numb    | er                   |          |  |
| PARENT CEH      | <b>RTIFICATION and EXPLA</b>  | NATION                      |                   |                      |          |  |
| Your parent(s)  | is/are required to complete a   | nd sign the Parent Certific | ation below:      |                      |          |  |
| Parent 1 Name   |   |                             |                   |                      |          |  |
|                 | Last  | F                           | irst              |                      |          |  |
| Parent 2 Name   |   |                             |                   |                      |          |  |
|                 | Last  | F                           | irst              |                      |          |  |
|                 | <b>st be checked by parent(s</b><br>fy that my child does not live <b>y</b> |                             | ocessed:          |                      |          |  |
|                 | e to complete the parent port   |                             | SA.               |                      |          |  |
| I unde          | erstand that by completing thi  | s form I cannot apply for a | Federal parent F  |                      |          |  |
| □ I certit      | fy that I do not provide any su   | pport to my child. I stoppe | ed supplying supp | oort (month/year): _ |          |  |

Provide explanation below: Attach additional pages if necessary.

**Notice:** Students completing this form are **ONLY eligible for the Federal Direct Unsubsidized Loan** at the dependent student loan limit. Students completing this form are not eligible for any need-based aid, including federal, state and institutional funds.

## **Certification Statement and Signature**

By signing below, I/we certify that the information provided is true and accurate. I/we understand that any false statement or misrepresentation may be cause of reduction and/or repayment of federal, state, or institutional financial aid. I/we agree to provide additional proof of information provided on this form.

| Parent Signature:   | Date: |  |
|---------------------|-------|--|
| Student Signature:  | Date: |  |
| Notary Signature:   | Date: |  |
| Commission Expires: | Seal: |  |