

Financial Aid: Request for Unsubsidized Loan due to No Parental Support

You did not report information about your parent(s) on your Free Application for Federal Student Aid (FAFSA). You indicated that your parent(s) are unwilling to provide their information on the FAFSA, but that you do not have an unusual circumstance that prevents you from contacting them or obtaining their information. Complete this form if you wish to apply for a Direct Unsubsidized Loan only.

AID YEAR 20 _____ -20 _____

Student's Name:

Last Name: _____ First Name: _____ MI: _____

Student ID #: _____

Students Address:

Street Address: _____ Apt.#: _____ City: _____ State: _____ Zip Code: _____

Student's Date of Birth: _____ Email Address: _____

Student's Home Phone Number: _____ Alternate/Cell-Phone Number: _____

Complete this form if:

- You have contact (regardless of how much) with your parent(s) and,
- You do not receive ANY support from your parent(s); this includes insurance coverage, auto payments, or support of any kind, or
- Your parent(s) have refused to complete the parent portion of the FAFSA for the aid year indicated above

PARENT CERTIFICATION

Your parent(s) are required to complete the Parent Certification below:

Parent Name: Last Name _____ First Name: _____

Parent Spouse's Name: Last Name _____ First Name: _____

Information for the Parent's Spouse is required if the Parent is married.

Check all that apply:

- ☐ I certify that my child does not live with me.
- ☐ I refuse to complete the parent portion of the FAFSA.
- ☐ I understand that by completing this form I cannot apply for a Federal Parent PLUS Loan
- ☐ I certify that I do not provide any support to my child. The date I stopped supplying support (month/year): _____

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

Please print this form and physically sign it. 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 for reduction and/or repayment of federal, state, or institutional financial aid. I/we agree to provide additional documentation as requested.

Student's Signature: _____ Date: _____

Parent Signature: _____ Date: _____

Parent Spouse's Signature: _____ Date: _____

Please contact the [Financial Aid Office](#) if you have any questions.