CAPE COD COMMUNITY COLLEGE
Powerful Futures Start Here

Financial Aid Office
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2024-2025 PARENT REFUSAL TO COMPLETE FAFSA

Student Name: _____ CCCC ID: _____

You indicated on the Free Application for Federal Student Aid (FAFSA) that you are unable to provide parental information. If your parents refuse to complete the FAFSA, you may be considered for only a Federal Direct Unsubsidized Stafford Loan. You and your parent must complete and sign all sections below.

I _____ , the parent of _____, do hereby attest the following.

Please circle item 1 or 2 or both:

1. 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) will not claim the student on **2024** 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 housing for even short periods of time.

OR

2. I and/or my spouse, (if married), refuse to complete the parent section of the FAFSA.
   - I (we) understand this limits the student's eligibility to an unsubsidized federal student loan.
   - 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.

_____ _____ _____

Parent's signature Parent's Printed name Date

Your signature below indicates that you are affirming that your parents refuse to complete the FAFSA or 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