

## 2017-2018 Parent Refusal Letter

Student First Name: \_\_\_\_\_ Student Last Name: \_\_\_\_\_ ID: \_\_\_\_\_  
 DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_ Primary Phone #: (\_\_\_\_) \_\_\_\_\_-\_\_\_\_ Secondary Phone #: (\_\_\_\_) \_\_\_\_\_-\_\_\_\_

**On your 2017-2018 FAFSA, you told us that you think you have a special circumstance and are unable to provide parental information. At this time, your FAFSA is currently considered incomplete. Please review the following information:**

The U.S. Department of Education gives schools the authority to offer financial assistance when there is clear indication that a student's parents have ended **ALL** financial support and /or **REFUSE** to complete and sign a Free Application for Federal Student Aid (FAFSA). A school may only offer such students an unsubsidized student loan and only after one parent completes and signs this Parent Refusal Letter.

### STUDENT CERTIFICATION:

I certify that the information provided is true and complete to the best of my knowledge. If your parents refuse to sign and date a statement to this effect, you must get documentation from a third party, such as a teacher, counselor, or attorney.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### PARENT CERTIFICATION:

I attest to the following:

1. I am the parent of \_\_\_\_\_.
2. I refuse to complete the parent portion of the FAFSA application and
3. I will not and have not provided the above mentioned student with any financial support, including the payment of educational costs, other cash, and non-cash support such as room and board as of the following date:  
\_\_\_\_\_.
4. In addition, I will not provide financial support to the student in the future.

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed name

\_\_\_\_\_  
Phone Number

**Please submit to either of the following UTRGV locations:**

<b>The Tower, Main 1.100</b> <b>One West University Blvd.</b> <b>Brownsville, Texas 78520</b> <b>Ph: (888) 882-4026</b> <b>Fax: (956) 882-8229</b>	<b>Visitors Center 1.113</b> <b>1201 West University Drive</b> <b>Edinburg, Texas 78539</b> <b>Ph: (888) 882-4026</b> <b>Fax: (956) 665-2392</b>
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For Office Use Only:

Processed by: \_\_\_\_\_

Date: \_\_\_\_\_