## 2024-2025



## **Contributor (Parent) Refusal Form**

[Covers Fall 2024, Spring 2025, Summer 2025 Student's Name (PRINT): Phone: ( Date of Birth: \_\_\_\_/\_\_\_ Home Campus: HCC ID: (9-digit number required) Federal regulations give schools the authority to allow a student to borrow a Federal Direct Unsubsidized Loan when the student's parents have ended all financial support and have refused to complete and sign a Free Application for Federal Student Aid (FAFSA). Students who request consideration for the loan should read the information on this form and have one contributor (parent) complete and sign this form. Please note that this form does not allow a student to apply for financial aid as an independent student. Students must understand that they are requesting only an unsubsidized loan subject to the limits for dependent students. No other federal, state, or university need-based aid will be available, including the Federal Direct PLUS Loan. Although the Financial Aid Office may waive the requirement for parent income and asset information on the FAFSA, the student must complete and submit a FAFSA that includes all of the required student information and certifications. Note to student: If you meet the conditions shown in the contributor (Parent) Section, but your contributor (parent) will not sign this form, you may submit a letter from a third party (e.g. teacher, counselor, clergy, and court) who is familiar with your situation and can describe your relationship with your contributors (parents). The letter must be on appropriate letterhead. Contributor (parent) Attestation \_\_\_\_\_, stopped providing financial support to the student (including payment of (Contributor(Parent) name) educational costs, as all other cash and non-cash support to the student such as room and/or board) as of the following date (mm/dd/yyyy) and I will not provide financial support to the student in the future, and I refuse to complete the parental section of a Free Application for Federal Student Aid (FAFSA). Contributor (Parent) Address: \_\_ City Street State Zip Certification By signing below, I/we acknowledge and confirm that the above information is complete and correct. Purposely giving false or misleading information may result in federal fines, jail sentence, or both. If student is dependent, one parent whose information was reported on the FAFSA must sign and date this form. Student Signature: Contributor (Parent) Name: Contributor (Parent) Signature:

HCC is committed to a workplace and educational environment free of discrimination and harassment based upon race, color, religion, age, sex, gender, national origin, disability, status as a veteran, or sexual orientation. Phone: 713-718-8490

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