



/2024-2025 Parent Refusal of FAFSA Information

Student ID: _____ Name: _____

I, _____ certify that I am the parent of the above-named student, who is applying for Federal financial aid at Southeast Missouri State University for the 2024-2025 academic year and that I am unwilling to provide my tax information or to complete the FAFSA.

I further certify that I do not provide the above-named student with any monetary or in-kind support which includes, but is not limited to: room and board, tuition payments, medical or other insurance or expenses, car payments, cell phone, or clothing nor will I provide support in the future.

I further certify I stopped providing financial support as listed above on _____.

I understand that this statement does not qualify the student to be considered an independent student and that the student will only have eligibility for the unsubsidized Federal Direct Loan at the dependent student level.

I further understand that if information is received at a later date that refutes this document, all financial aid eligibility will be suspended until clarification of the conflicting information has been resolved.

Parent Signature

Date Signed

STATE OF <State>, COUNTY OF <County>, ss.:

On this day, personally appeared before me

to me known to be the person(s) described in and who executed the within and foregoing instrument, and acknowledged that he/she signed the same as his/her voluntary act and deed, for the uses and purposes therein mentioned.

Witness my hand and official seal hereto affixed

this _____ day of _____, _____.

Notary Public in and for the State of _____.

My commission expires _____.