



## 2026-2027 Parental Refusal of Support

### SECTION A: STUDENT INFORMATION

Name: **UNTD Assigned ID:** **SSN (last 4 digits only):**

### SECTION B: PARENT VERIFICATION AND CERTIFICATION OF LOSS OF SUPPORT

**Please initial each statement below and provide information as requested:**

I verify that financial support is NOT being provided by either of the student's parents. Financial support includes not only payment by the parent of educational costs, but also providing other cash and non-cash support to the student such as room and/or board, insurance (medical and/or auto), claiming student on taxes and/or paying other expenses on the student's behalf.

I verify that financial support from the student's parents ended on \_\_\_\_\_.  
(MM/CCYY)

I verify that financial support from the parents to the student will not occur during this academic year.

I verify that the student's parents refuse to complete the Free Application for Federal Student Aid (FAFSA).

I understand that the student will **ONLY** be eligible to receive an unsubsidized Stafford loan. The student will **NOT** be eligible for any other Federal, State and/or Institutional financial aid [i.e. grants (including Federal Pell Grant), work-study or need based student loans] without parental information on the FAFSA.

By signing below, you certify that the above statements are true and you understand the financial aid limitations involved in not providing parental information on the FAFSA.

**Parent Signature**

**Printed Name of Parent**

**Date**

X \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**\*NOTE\* If you are unable to obtain a parent's signature you must submit a written and signed statement from a third party, such as a member of clergy, counselor, teacher, court representative, etc. to confirm the parental refusal and loss of support.**

In lieu of parental signature I will provide the written and signed statement from a third party.

*\*Please include statement with form submission.*

### SECTION C: STUDENT CERTIFICATION

I certify that the above statements are true and I understand that I will **ONLY** be eligible to receive an unsubsidized Stafford loan. I will **NOT** be eligible for any other Federal, State and/or Institutional financial aid [i.e. grants (including Federal Pell Grant), work-study or need based student loans] without parental information on the FAFSA. I understand that I must sign and return this form for my financial aid to be processed. **Electronic signatures are not accepted.**

**Student Signature**

**Date**

X \_\_\_\_\_

\_\_\_\_\_

**Return this completed form with any required documentation to:**

Office of Financial Aid & Scholarships/University of North Texas at Dallas/7350 University Hills Blvd., Dallas, TX 75241  
or fax to (972) 338-1799 or save and attach as PDF and email to [financialaid@unt.edu](mailto:financialaid@unt.edu)