Office of Financial Aid & Scholarships
2027-2028 Certificate of Parental Non-Support

Federal regulations give schools the authority to allow students to borrow a Federal Direct Unsubsidized Loan when the student's parents have ended all financial support and have refused to complete and sign the Free Application for Federal Student Aid (FAFSA). Students who request consideration for the loan should read the information below and have one parent complete and sign this form. **Please note that this form does not allow the student to apply for financial aid as an independent student.**

Student name (Last name, First name)	
A-State ID number	Cell phone number

- Students must understand that by completing this form they will only be eligible for an unsubsidized loan subject to the limits for dependent students.
- No other federal aid will be available, including the Federal Pell Grant, Direct Subsidized Loan, Federal Work Study, and the Direct PLUS Loan.
- Although the Office of Financial Aid & Scholarships 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.
- The **Federal Direct Unsubsidized Loan** is a loan in which the Federal Government **does not** pay the interest charges for the student.

Certification of Parental Non-Support

❑ I certify that **all** of the following statements are true:

❑ I, _____, refuse to complete the parental section of the Free Application for Federal Student Aid (FAFSA).

❑ I have stopped providing financial support, including, cash and non-cash support (such as room and board) to the student as of _____ (date in which support ended), and will not provide such support in the future.

❑ I have not claimed the student on my 2025 taxes.

❑ The student does not live in my home.

❑ The student is not included on any of my insurance policies (i.e. medical and/or auto).

By signing this Verification Statement, I (we) certify that all information reported is complete and accurate. WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.

X _____ _____

Student Signature **Date**

X _____ _____

Parent Signature **Date**

Please complete and return to: A-State Office of Financial Aid & Scholarships
Mail: **P.O. Box 1620 State University, AR 72467** Fax: **870-972-2794** Email: **finaid@astate.edu**