



2018-19

Parent Refusal Form

Financial Aid Office

Bristol Community College

777 Elsbree Street

Fall River, MA 02720

Dependent Applicant

Parent(s) refuse to provide financial information and support

This form is to be completed by a financial aid applicant who:

- Does not qualify for a dependency override, and
- Parent(s) refuse to provide financial information and support, and
- Understands that consideration will be given for federal unsubsidized loans only.

Use black or blue ink only

Student Name _____

BCC Student ID: 900 _____

Birth Date: _____

Mother's (or stepmother) Name: _____

Father's (or stepfather) Name: _____

We certify that:

- We will not provide information on the FAFSA for this student.
- We do not and will not provide financial support to this student.
- Our financial support to this student ended: _____ (date)

Parent Signature: _____ Date _____

If a parent signature is not available, then a third party signature is needed.
(teacher, counselor, cleric, court, etc.)

I certify that the above is true:

Third party signature: _____ Date _____

Your relationship to the student: _____

Please print your name _____

Your address _____

Your phone _____

I certify that the above is true.

I understand that I will be reviewed for Federal Unsubsidized LOANS only.

Student signature: _____ Date _____

Return this form by mail or in person to:

Financial Aid Office, Bristol Community College, 777 Elsbree Street, Fall River, MA 02720

Office use only

__ RNARSxx ISIR and EDE = Dependent

__ RNARSxx Official

__ RNARSxx 99999

__ RPAAWRD dep w/o parent

__ RPAAWRD DUNSUB