



**Financial Aid, Student Employment
& Military Education Benefits**

Mellencamp Hall, Room 162, P.O. Box 469, Milwaukee, WI 53201-0469
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PARENTAL CERTIFICATION OF REFUSAL TO PROVIDE INFORMATION

PARENT: Complete Sections 1 and 2. Read each statement in Section 3. Enter the date you stopped supporting the student in Section 3. Upon receipt of the completed form, the dependent student may be granted a Federal Unsubsidized Stafford Loan, at the discretion of this department.

CERTIFICATION:

The parent **must** sign the completed form in Section 4. By signing, you certify that you agree with each of the statements in Section 3.

SECTION 1: Student Information			
Last Name	First Name	MI	E-mail Address
Student ID	Telephone Number	Cell Phone Number	Date
SECTION 2: Parent Information			
Last Name	First Name	MI	
Address (street, city, state, zip code)	Daytime Telephone Number	E-mail Address	Date
SECTION 3: Required Information			
<p><i>Read statements one through four. Enter the date in statement three on which you stopped supporting the student. Incomplete forms will be returned without being processed.</i></p> <ol style="list-style-type: none"> 1. I understand that the dependent student will only be eligible for a Federal Unsubsidized Stafford Loan and will not be considered for any other forms of federal, state, or institutional financial aid. I understand that the student will not be considered independent for financial aid purposes. 2. I, the parent of the above student, refuse to complete the parental section of the FAFSA (Free Application for Federal Student Aid). 3. I, the parent of the above student, have stopped providing financial support to the above student. I understand that financial support includes payment of educational costs, cash and non-cash support, providing room and board for the student, and providing auto or health insurance. The date on which I stopped supporting the student is _____ (required). 4. I, the parent of the above student, will not provide any financial support in the future. 			
SECTION 4: Certification			
<p><i>I certify that the above information is true and complete. I acknowledge and understand each of the statements in Section 3 of this form. By signing below, I further certify that I agree with each of the statements in Section 3.</i></p> <p>_____ Date _____ Parent's Signature (Required)</p>			