

## FINANCIAL AID OFFICE 2018-2019

## DEPENDENT STUDENTS WITHOUT PARENTAL DATA

NAME:	SCCC ID:
Per the U.S. Department of Education, if you are considered a Dependent student, you are required by law to provide parental information and signatures on the Free Application for Federal Student Aid (FAFSA) to be considered for financial aid. If your parent refuses to complete the parental sections of the FAFSA, you <b>may</b> be eligible to receive a William D. Ford Direct Unsubsidized Loan. No other Federal, NJ State, or need-based aid will be available (including the Federal Direct PLUS).	
Please complete all sections below.  SECTION A. Provide separate statements from you and your parer provide information (i.e.: bio-demographic, income, etc.) to compl provide the statement from your parent(s), you must obtain docur	ete the FAFSA. If you are unable to mentation from a third party (i.e. teacher,
counselor, clergy, etc.) describing your relationship with your pare  SECTION B. (completed by the student).  I confirm the following (check each):  I have read and understand the statement above  I have completed a 2018-2019 FAFSA  I am self-supporting (provide a copy of your 2016 Federal Resource & Expenditure Statement)	
SECTION C. (completed by the parent):  I confirm the following (check each):  I have stopped providing support to the student as of  I did not & will not claim the student on my 2016 Tax Retu  I do not provide financial support for student (this consists student's educational expenses, medical insurance, housin  I will not provide financial support to the student in the fu  I refuse to complete the parental section of the FAFSA & p  SECTION D. CERTIFICATION: I/we certify by signing this form that all i asked, I/we will provide information that will verify the accuracy of this form	orn s of cash & non-cash support to cover the ng costs, other financial obligations, etc.) ature provide supporting documentation information reported is true and complete and if
SIGNATURE [Student]:	
STUDENT's Name (Please print):	
SIGNATURE [Parent]:	DATE:
PARENTS's Name (Please print):	
OFFICE USE ONLY  Approved Denied Comments:	
FAO Reviewer:	Date: