

2021-2022 Parent Refusal to Provide Information

Office of Student Financial Aid

| | | | C 0 0 | |
|--|---|--|--|---|
| st Name | First Name | M.I. | BRCTC ID number | |
| ddress | | | Phone Number (include area c | ode) |
| ty | State | Zip Code | Email Address | |
| have ended all frequest consider does NOT allow be available. All the student much | financial support and have referation for the loan should real a student to apply for finance though the Office of Student Fast still complete and submit a | used to complete and sind the information below cial aid as an independe inancial Aid may waive the FAFSA that includes all includes al | porrow a Federal Direct Unsubsidized Loagn the Free Application for Federal Study and have the parent(s) complete and sont student. No other federal, state, or in the requirement for parent income and a required student information. | ent Aid (FAFSA). Students who sign this form. Note: This form nstitutional need-based aid will asset information on the FAFSA, |
| | and are unable to provide pare | | | u mulcate that you have special |
| • | Your parent(s) refuse to c Your parent(s) do not clai You do not live with your | ontribute to your colleg m you as a dependent o parent(s) | e expenses | nce, auto insurance, food, |
| As noted on you the following co | | I to provide evidence of | your situation. Please have your parent | (s) sign and have notarized that |
| s t □ l | support as of// hose related to current and fu | (date when financial uture college related cos named student, do hero | eby state, that we refuse to complete th | penses and not just |
| Parent Signatur | e | Date | Parent Signature | Date |
| Please have th | ne above signatures notari | zed below. | | |
| | | | of, 20, by tory evidence that they are the person who h | |
| Notary Public | | | | |

Fax: 304.260.4376

Email: finaid@blueridgectc.edu

To return this form:

Mail: Office of Student Financial Aid 13650 Apple Harvest Drive Martinsburg, WV, 25403