

## 2025-2026 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 \_\_\_\_\_

Bristol ID#: 900 \_ \_ \_ \_ \_

Birth Date: \_\_\_\_\_

Mother's (or stepmother) Name: \_\_\_\_\_

Father's (or stepfather) Name: \_\_\_\_\_

We certify that:

- We will not provide information on the 2024-2025 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/Guardian 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 \_\_\_\_\_

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