



115 South Street Middletown, NY 10940 (845)341-4190 fax (845)341-4194
1 Washington Center Newburgh, NY 12550 (845) 562-245 fax (845)220-4062
www.sunyorange.edu

Parent Refusal to Complete FAFSA Affidavit

You indicated on the FAFSA that you are unable to provide parental information and/or your Independence Appeal was denied. If you still cannot obtain parental information on the FAFSA and want to be considered for a Federal Unsubsidized Stafford Loan you and your parent must complete and sign all sections below and submit this form to the Financial Aid Office for review.

For purposes of completing the FAFSA and this form if your birth parents are not currently married then your parent is considered to be the parent you lived with more during the past 12 months. If you did not live with one parent more than the other, then it is the parent who provided more financial support during the past 12 months or during the last calendar year when support was provided. If that individual has married someone else then the step-parent is also considered a parent for these purposes. Grandparents, foster parents and legal guardians are not considered parents unless they have legally adopted you. Providing parental information on the FAFSA does not obligate the parent to provide support to the student in support of higher education.

I _____ am the parent of _____
as defined above. I do hereby attest that the following statements are true:

I and my spouse, if married, have ceased providing *any* financial support effective _____.
(date support ended)

I (we) do not provide coverage under a family health insurance plan, provide coverage under the family auto insurance plan or provide non-cash support such as free room and board for even short periods of time.

Furthermore, I (we) will no longer provide any support to the student in the future.

I understand that providing parental information on the FAFSA in no way obligates me to actually provide any support to my child in their pursuit of higher education yet I am still refusing to complete the FAFSA and provide parental information.

Parent Signature _____ Date _____

Student Instructions

Your signature below indicates that you are affirming that your parents have refused to complete the FAFSA, have ceased to provide support including health or auto insurance, support for bills or living expenses, and do not provide free room and board for even short periods of time and will no longer provide any support in the future.

Student Signature _____ Date _____ Banner ID _____

