

Parent FAFSA Refusal 2024-2025

]	Lakeland ID Number (LID)	0 0	
A. Student Info	ormation				
Student's Name:					
Mailing Address: _					
student's parent(s) l Student Aid (FAFS) parent complete and student. Students m	give schools the authority to allow have ended all financial support and A). Students who request consideral I sign this form. Note that this form ust understand that they are request rederal or state financial aid will be	have re tion for does no ing only	fused to complete and sign a F the loan should read the inform t allow a student to apply for f an unsubsidized loan subject t	ree Application for nation on this form a inancial aid as an in	Federal and have one adependent
•	cial Aid Office may waive the requiete and submit a FAFSA that include		•		FSA, the
from a third party (e	you meet the conditions shown in Se.g. teacher, counselor, clergy, court he letter must be on appropriate let	t) who is			
B. Parent Info					
☐ I have stopped pr	roviding financial support to the stute to the student such as room/board,			costs, as well as all	other cash and
☐ Date support end	ed:				
	e financial support to the student in	the futur	re.		
☐ I refuse to compl	ete the parental section of a Free A	pplication	on for Federal Student Aid (FA	FSA).	
Parent's Name:					
Mailing Address: _					
C. Certification	n				
Each person signing	this worksheet certifies that all the or misleading information on this				
Student's Signature	e:			Date:	
Parent's Signature:				Date:	
	Comple		orm and return:*		
By Fax:	440.525.7704	-	7700 Cl. 14 D '	. W. 4 1 0	JI 44004 5100
By Mail: By <u>Secure Upload</u> :	Lakeland Community College Visit lakelandcc.edu/financialaid	•	7700 Clocktower Drive Under RelatedLINKS (right s Financial Aid Documents Sec credentials required)	ide of page), select)H 44094-5198 Lakeland login
In Person:	Lakeland Student Service Center	•	located in Building A-1003		

^{*}Please do not send documents through email as it is not secure.