

# NON-PARENTAL SUPPORT VERIFICATION

Student's Name (PRINT): \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

 PBSC ID: \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Home Campus: \_\_\_\_\_  
(9-digit number required) (Primary location of attendance)

Based on the results of your Free Application for Federal Student Aid (FAFSA), you did not report information about your parent(s). You indicated that your parent(s) are not financially supporting you, nor will be supporting you financially in the future.

**If ALL of the following apply, please complete this form:**

- You have contact (regardless of how much) with your parent(s) but do not live with them.
- You do not receive ANY support from your parent(s); this includes insurance coverage, auto payments or support of any kind.
- Your parent(s) have refused to complete the parent portion of the 2019-2020 FAFSA.

**Your parent(s) are required to complete the Parent Certification below:**

Parent Certification	
Father/Stepfather Name:	
Mother/Stepmother Name:	
<b>(All boxes must be checked by parent(s) before form is processed)</b>	
<input type="checkbox"/>	I certify that my child does not live with me.
<input type="checkbox"/>	I refuse to complete the parent portion of the 2019-2020 FAFSA.
<input type="checkbox"/>	I understand that by completing this form I cannot apply for a Federal PLUS Loan.
<input type="checkbox"/>	I certify that I do not provide any support to my child.
<input type="checkbox"/>	Date support stopped _____.

**Notice:** Students completing this form are ONLY eligible for the Federal Direct Unsubsidized Loan at the dependent student loan limit. Students completing this form are not eligible for any need-based aid, including federal, state or institutional funds.

**Certification Statement and Signature:**

By signing below, I certify that the information provided is true and accurate. I understand that any false statement or misrepresentation may be cause for reduction and/or repayment of federal, state, or institutional financial aid. I agree to provide additional proof of information provided on this form.

 \_\_\_\_\_  
 Student's signature Date

 \_\_\_\_\_  
 Mother/Stepmother signature Date

 \_\_\_\_\_  
 Father/Stepfather signature Date

**(Seal)**

 \_\_\_\_\_  
 (Notary Signature)

**My commission expires on** \_\_\_\_\_  
 Date