

**UNIVERSITY OF NEVADA, LAS VEGAS  
FINANCIAL AID & SCHOLARSHIPS**

BOX 452016  
4505 S. MARYLAND PARKWAY  
LAS VEGAS, NV 89154-2016

PHONE: (702) 895-3424  
FAX: (702) 895-1353  
Email: financialaid@unlv.edu  
http://finaid.unlv.edu

<u>OFFICE USE</u>
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**2009-2010 PARENT ATTESTATION OF REFUSAL OF FINANCIAL SUPPORT FOR A  
DEPENDENT STUDENT**

**Student:** If your biological /adoptive parent(s) are unable to provide income information on the Free Application for Federal Student Aid (FAFSA) due to extenuating circumstances beyond you or your parent's control, please contact our office for more information. You may qualify for a Dependency Status review.

**Parent:** The Financial Aid & Scholarships Office at the University of Nevada Las Vegas has received notification from the U.S. Department of Education through the Free Application for Federal Student Aid (FAFSA) your son/daughter completed, that you, the biological or adoptive parent, have refused to complete the parental section of the FAFSA. The FAFSA is used to determine a student's eligibility to receive Federal, State, and Institutional financial aid to assist the student with their educational expenses.

The U.S. Department of Education requires Financial Aid & Scholarships to acquire written verification from the parent attesting to the following conditions. Please initial all of the following statements indicating that you understand the conditions of each statement, sign the bottom, and return this form to the Financial Aid & Scholarships Office. Please contact our office if you have any questions regarding this form.

**Student Name:** \_\_\_\_\_ **L#:** \_\_\_\_\_

(\_\_\_\_\_) I, the biological / adoptive parent of the above named student do not provide financial support in any form, including but not limited to, funds for housing, meals, transportation, medical costs, clothing, personal hygiene products, insurance, etc.

**Effective date of discontinuation of financial support:** \_\_\_\_\_ (required)

(\_\_\_\_\_) I, the biological / adoptive parent of the above named student do not intend to provide financial support during the 2009-10 academic year and therefore give up my right to apply for and receive a PLUS (Parent Loan for Undergraduate Students) for the student to assist them with educational expenses for the 2009-10 academic year.

(\_\_\_\_\_) I, the biological / adoptive parent of the above named student refuse to provide my personal and financial information on the student's FAFSA (Free Application for Federal Student Aid) for 2009-10.

Under penalty of perjury, all of the information I have provided on this form and in any accompanying documentation is true and accurate to the best of my knowledge and belief.

**Parent Name: (printed)** \_\_\_\_\_

**Parent Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_