

You have submitted the 2025–2026 Free Application for Federal Student Aid (FAFSA) without providing parental information and have not indicated any special circumstances that would qualify you are an independent student. Per Federal Financial Aid Regulations, you are classified as a dependent student. Therefore, you must provide the following documentation to our office for further review of your aid eligibility.

## STUDENT INFORMATION

Name: \_\_\_\_\_ Student ID: \_\_\_\_\_

## REQUIRED DOCUMENTATION

A notarized statement signed by your parent addressing all of the following:

- Student does not currently live with parent(s); and
- Parent(s) stopped providing financial support as of (date) \_\_\_\_\_; and
- Parent(s) will not provide financial support in the future; and
- Parent(s) refuse to complete the parental section of the FAFSA; and
- Parent(s) are not and will not provide health **and/or** auto insurance for the student

Student **must** provide a **signed** detailed statement addressing all of the following:

- Personal statement of where they live and why the parent(s) will not file the FAFSA
- Proof of health insurance and auto insurance or explanation of who provides coverage

If this form is approved, the student will only be eligible for Federal Direct Unsubsidized Loans at the annual grade level maximum, \$5,500 for freshman, \$6,500 for sophomore, \$7,500 for junior and senior levels, not to exceed aggregate loan limits. Complete the section below giving Edison State Community College permission to award and originate the student loan, if desired. Entrance Loan Counseling and the Master Promissory Note must be completed at Studentaid.gov before the loan will be processed.

## LOAN REQUEST

**Anticipated credit hours of enrollment in the terms you would like to utilize loan funding** (Please indicate the number of credit hours by term)

\_\_\_\_\_ Summer 2025

\_\_\_\_\_ Fall 2025

\_\_\_\_\_ Spring 2026

For the terms I have selected, I wish to request this amount: \$ \_\_\_\_\_ (must enter dollar amount)

**Anticipated Graduation Month/Year:** \_\_\_\_\_

**Housing:** Is anyone in your household is receiving a military housing allowance (BAH) or live on a military base? ☐ Yes ☐ No

## STUDENT CERTIFICATION

I certify that all the information on this application is true and complete. I recognize that it is my responsibility to read the Borrower Rights and Responsibilities. By signing below, I certify that these funds will be used for educational purposes and in accordance with the rules and regulations set forth by the Department of Education. I further understand that it is my responsibility to notify the Office of Financial Aid of any changes to my enrollment. I understand that should **I fall below six credits in any term within the loan period prior to disbursement, that term disbursement, and all following disbursements will be cancelled, and a new loan request must be submitted to borrow again.** I also understand I have the right to cancel all or a portion of my awarded loan amount.

**Student Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

FOR OFFICE USE ONLY

Approved \_\_\_\_\_ Denied \_\_\_\_\_ Loan Amount Applied: \_\_\_\_\_ (or attach loan worksheet) Reviewer: \_\_\_\_\_

Comments: \_\_\_\_\_

\_\_\_\_\_

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