



YORK COUNTY COMMUNITY COLLEGE

York County Community College

Financial Aid Office

112 College Drive

Wells, ME 04090

P: 207-216-4403, finaid@yccc.edu

(Be sure to **password protect** documents you send through email)

Statement of Parental Non-Support 20__ - 20__

Student's Name: _____ YCCC ID _____

Parent 1 Name: _____ Parent 2 Name: _____

Student Address: _____

City, State, Zip: _____

Dear parent:

To apply for federal student aid, the student name above is required to provide parent information on the Free Application for Federal Student Aid (FAFSA). The student has indicated that you are not willing to provide parent information on the FAFSA. Without the required parent information, the student cannot be evaluated for any federal or state grant assistance and aid eligibility is limited to unsubsidized federal student loans only. Before unsubsidized federal student loan eligibility can be determined for the student, this form needs to be completed by you and returned to the YCCC Financial Aid Office.

By signing this statement, you are certifying that:

1. You refuse to provide parent information on the FAFSA, and
2. That you do not and will not provide financial support to the student.

Indicate the date parental support for the student ended: _____

Parent 1 Signature: _____ Date: _____

Parent Phone Number: _____

Parent 2 Signature: _____ Date _____

Parent Phone Number: _____

A representative of the YCCC Financial Aid Office may contact you to verify your signature.

If you plan on emailing documentation to us, please password protect any documents that have personally identifiable information (such as a Social Security Number) prior to emailing it. Instructions can be found here: www.yccc.edu, click on "MyYCCC" at the top, "Campus Services", "Financial Aid", "Financial Aid Forms", and "Password Protect Your Documentation".