

## 2025-26 Parent Refusal Form

Student Name:	Student ID:
Phone #:	Date of Birth:

Refusal of the parent to support the student and/or refusal for the parent to complete the Free Application for Federal Student Aid (FAFSA) is not by itself sufficient for a dependency override. However, your financial aid officer may decide to award an unsubsidized Stafford loan without the student's parent or parents having to complete the FAFSA. If the override is approved, students are eligible to receive only an unsubsidized loan and not any other Title IV assistance. In addition, parents would not be eligible to apply for a PLUS loan on the student's behalf.

The maximum annual unsubsidized loan amount that a dependent student may receive is the "base" annual loan limit and the additional unsubsidized \$2,000.

Grade Level	Annual Base Amount	Additional Unsubisidized
Freshman	\$3,500	\$2,000
Sophomore	\$4,500	\$2,000

Remember, if this override is approved, you are eligible for only Federal Unsubsidized Student Loans only and no other Title IV assistance. Federal Unsubsidized Student Loans are not "needbased". The federal government does not pay the interest on the Stafford loans. You will be responsible for the interest as it accrues and compounds, starting from when the first disbursement is made. The current interest rate for unsubsidized loans is 5.5%. Repayment information is at <a href="https://www.finaid.org/loans">www.finaid.org/loans</a>. Additional loan paperwork may be required, contingent upon the approval of your FAFSA, and after your federal aid is awarded.

Failure to provide parent documentation puts the burden back on the student to collect the above-mentioned documentation from a teacher, counselor, or clergy member. The third party also must describe the student's relationship with his or her parents. Documentation does not constitute automatic omission of parent information. It is up to the financial aid officer to reach a decision basec upon documentation. The student will be contacted within 4 weeks from when all documentation is provided, via email.

## Please continue to the next page.

Each person signing this worksheet certifies that all the information reported on it is complete and correct. WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.

I, the student, certify that I have read and unde	erstand the above information.
Student Signature:	Date:
Parent, please check the box(es) that applies:	
car insurance, etc.) for the above-mentioned	ancial support (housing, food, health insurance, d student. Financial support ceased on ide financial support to the student in the future.
☐ I, the parent, refuse to complete the followin	ng 2025-26 FAFSA.
<b>2025-2026</b> – This FAFSA is used for Fall 202	25, Spring 2026, and Summer 2026.
Parent Signature:	Date:

## **Barton Financial Aid Office**

(866) 257-2574 | financialaid@bartonccc.edu

Barton Community College | 245 NE 30th Road | Great Bend, KS 67530 US

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