

Student's Name _____

GCC ID # _____

**FINANCIAL AID OFFICE
2019-2020 STATEMENT OF PARENTS' NON-SUPPORT**

In the event a student's parent(s) refuse to provide parental information on the student's federal FAFSA form, the student may be eligible for a Federal Unsubsidized Stafford Loan.

In order to determine federal aid eligibility, students must submit all required documents and meet all federal aid eligibility criteria. In addition, you must also submit the following to the Financial Aid Office:

- 2019-2020 Statement of Parent's Non-Support (this form)
- Student's Statement of Basic Living Expenses (included with this form)

Print name of mother/stepmother: _____

Address of mother/stepmother: _____
street city state zip

Print name of father/stepfather: _____

Address of father/stepfather: _____
street city state zip

By signing this form, I/we hereby verify that we:

- Have stopped providing financial support to the student listed above as of ____ / ____ / ____ , including cash and non-cash contributions to living expenses **AND**
- Will not claim this student as an exemption/dependent on our 2017, 2018 and 2019 income tax returns **AND**
- Will not provide financial support to this student in the future **AND**
- Refuse to assist this student in his/her application for financial aid and will not complete the parental section of their federal FAFSA (Free Application for Federal Student Aid)

Both parents' signatures are required. If parents are divorced or separated, have the parent you lived with more during the past 12 months sign the form. If you did not live with one parent more than the other, have the parent who provided more financial support during the past 12 months, or during the most recent year that you actually received support from a parent sign the form. If this parent is remarried as of today, have the parent and the stepparent sign the form.

Student's Signature Date

Mother/Stepmother's Signature Date Father/Stepfather's Signature Date

Student's Name _____

GCC ID # _____

FINANCIAL AID OFFICE
STUDENT'S STATEMENT OF BASIC LIVING EXPENSES
January 2018 - December 2018

INSTRUCTIONS: Complete the information below by listing expenses that you (and your spouse, if married) incurred between January and December 2018. If amounts differed from month to month, provide an average for the 12-month period. Do not include any expenses covered by food stamps or housing assistance. If an expense is not applicable (i.e., car payments), put a "0". **Do not leave any item blank.**

Amount per **MONTH**
(Do not leave any amount blank)

- | | |
|--|----------|
| 1. Rent or Mortgage (include principal, interest and taxes) | \$ _____ |
| 2. Utilities (gas, electric, water, telephone, cell phone etc.) | \$ _____ |
| 3. Food (at home and away from home) | \$ _____ |
| 4. Car Payment(s) | \$ _____ |
| 5. Transportation (gas, oil, repairs and/or maintenance, bus passes) | \$ _____ |
| 6. Elementary/Secondary Tuition or Child Care Paid | \$ _____ |
| 7. Car Insurance expenses | \$ _____ |
| 8. Medical/dental expenses paid but NOT covered by insurance | \$ _____ |
| 9. Child Support Paid (due to divorce or separation) | \$ _____ |
| 10. Expenses for clothing, entertainment, gifts & travel | \$ _____ |
| 11. Other Expenses: _____ | \$ _____ |

Did you receive Food Stamps/SNAP in 2018? YES NO

Did you receive housing subsidies in 2018? YES NO

CERTIFICATION: I certify that all information on this form is true, complete, and accurate. Upon request, I agree to provide proof of the information reported on this form. False statements or misrepresentation can be cause for denial, reduction, withdrawal, and/or repayment of financial aid. I give permission to the Financial Aid Office to make corrections/adjustments to data on my FAFSA based on forms and/or documents submitted.

Student's Signature _____ Date _____

For Financial Aid Office Use ONLY

Total Monthly Expenses _____

Total Annual Expenses (12 mo.) _____