

Missing Parent Information Review

Student Name: _____ ID#: _____ Academic Year: 2024-2025

You have indicated your parent(s) cannot and/or will not provide their financial information for completion of your Free Application for Federal Student Aid (FAFSA). Although the U.S. Department of Education allows a student to indicate a parent's refusal to provide this information, the student can only exercise this option if supporting documentation is submitted to substantiate this claim. **This form is an initial request. Based on the information provided, additional information and documentation may be requested. Please read and check the box below which best states your intention regarding your FAFSA application.**

If this was an error, log back into your 2024-2025 FAFSA to include your parent(s) information and resubmit your FAFSA as soon as possible.

- This is an error. I will correct my FAFSA and provide all required parental information.
- My parent(s) refuse to complete my FAFSA and do not and will not provide any financial support to me.
 - Please attach a **TYPED and SIGNED** personal statement that includes the following:
 - a. Describe the contact you have with each parent; AND
 - b. Explain why you cannot and/or will not provide parental information on your FAFSA.

Please return your signed form and, if applicable, all requested documentation to the UofL Student Financial Aid Office using one of the options below:

This form must be printed then signed with a **handwritten signature(s)** before submitting.

ULink Financial Aid Document Upload ¹ :	Log into your student ULink account at https://ulink.louisville.edu/ , open your 'Tasks' tile and select the ' <i>Financial Aid Document Upload</i> ' menu. For additional information, please visit https://louisville.edu/financialaid/applying-for-aid/document-upload .
Mail/In Person:	Student Financial Aid Office, Houchens Building Room 110, University of Louisville, Louisville, KY 40292
Fax Number:	502.852.0182

¹DO NOT E-MAIL this form or attachments; the options above are the only permissible way to securely submit documents to the UofL Student Financial Aid Office.

DO NOT submit this form or attachments to any other office.

I certify that all the information submitted as part of this request is complete and correct. I understand that if I purposely give false or misleading information you may be subject to criminal penalties under 20 U.S.C. 1097, which may include a fine up to \$20,000, imprisonment, or both. I understand that based on the information provided, additional information and documentation may be requested.

Student Signature: _____ Date: _____ Phone Number: _____