

Financial Aid Office 1801 East Cotati Avenue Rohnert Park, CA 94928

finaid@sonoma.edu sonoma.edu/finaid

Telephone: (707) 664-2389 Fax: (707) 664-4242

2025-26 No Parental Support Confirmation Form

Student Name				SSU I.E	0.
nstructions to S	Studen	t:			
Student Aid (FAFS effect from the pare	SA) or to ent(s) w is corre	o provide hose finated and w	e required documentation. If this ancial information would be required be used to determine your eli	is correct, you mus uired on the FAFSA	e the Free Application for Federal t provide a signed statement to that This will help us determine whether Direct Unsubsidized Loan eligibility
Please have your possible.	arents c	omplete	this form, sign the certification b	pelow, and return to	the Financial Aid Office as soon as
	1.	Are you and/or your spouse providing financial support to the student listed on this form? Yes No			
		•	answer no, please provide the dopped providing financial suppo		
	2.	-	ou and/or your spouse provide ial support to the student in the f	uture? Yes	□ No
	3. Are you <i>and</i> your spouse willing to complete the FAFSA <i>and</i> provide all required documentation? Yes No				
nay gain eligibility	for gra	ants, subs	lity for financial aid may improv sidized loans, and other program at (707) 664-2389 or by email a	s. If you need assist	• •
	ng this		tifies that all the information rep e signature is required.	orted on it is compl	ete and correct. Signatures of both
Parent 1 Name (please print)			Parent 1 Signature	Date	Phone number
Parent 2 Name (please print)			Parent 2 Signature		Phone number