

FAFSA Waiver Form

By signing below, I am requesting Hood College Office of Financial Aid to waive the requirement of completing the FAFSA. I understand that if I do not complete the FAFSA, I am ineligible for federal, need-based state, and need-based institutional aid at Hood College.

Student Signature _____

Date _____

Student Name (Print) _____

Student ID #:

Parent Signature _____

Date _____

However, I may still complete the FAFSA at a later date and will notify the Office of Financial Aid if / when I do so.

FAFSA Waiver Form

By signing below, I am requesting Hood College Office of Financial Aid to waive the requirement of completing the FAFSA. I understand that if I do not complete the FAFSA, I am ineligible for federal, need-based state, and need-based institutional aid at Hood College.

Student Signature _____

Date _____

Student Name (Print) _____

Student ID #:

Parent Signature _____

Date _____

However, I may still complete the FAFSA at a later date and will notify the Office of Financial Aid if / when I do so.