

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.	

finaid@hood.edu

301-696-3411



Office of Financial Aid

Financial Aid

10/2020

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www.hood.edu/financial-aid

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