



LEHIGH UNIVERSITY®

2025-2026 Confirmation of Unsubsidized Only Eligibility Form

Student Name: _____ Lehigh Identification Number (LIN): _____

Email Address: _____ Date of Birth: _____

On the 2025-26 FAFSA, you answered “YES” to question 8, indicating your parents are unwilling to provide their information. This limits your federal eligibility to unsubsidized loans only. Please answer the following question so we may continue to process your financial aid. We will contact you if additional information is required.

Did you intend to be considered for federal unsubsidized loans ONLY?

☐ No, I wish to be considered for other types of federal aid and will correct my FAFSA to provide parental information. I understand my financial aid application **will not** be fully processed until I have provided parent information on the FAFSA.

☐ Yes, I understand by not providing parental information I **will not** be considered for any federal grants, subsidized loans or work study program. In addition, I understand I **will not** be considered for any state need-based funds.

My signature below certifies that I understand the information provided above.

Student Signature: _____ Date: _____

If you have **unusual circumstances** that prevent you from contacting or obtaining your parents' information, you may request a dependency override. ***If a dependency override is appropriate and approved, you may be eligible to receive other types of Federal aid such as Federal Pell Grants and subsidized loans in addition to the unsubsidized loan.*** Independent living and/or parent refusal to supply information is not itself a reason for dependency override without compelling supporting documentation, including third-party letters. Please contact your financial aid counselor for more information on this process.

Parent Section – Only students who check “YES” above should have their parents complete this section. Federal regulations states that a financial aid administrator may award a dependent student an unsubsidized Federal Direct Loan. For a student to be eligible for this provision, they must document the following. Please check the appropriate box and submit with signature.

☐ The student's parents refuse to complete the FAFSA, or

☐ The student's parents do not and will not provide any financial support to the student above (please provide the date when the financial support stopped (____/____/____)).

I, _____, certify that all of the statements above are true.

Parent Name

Parent Signature: _____ Date: _____

If parents refuse to sign and date a statement to this effect, you must get documentation from a third party (the student is not sufficient), such as a teacher, counselor, cleric, or court, verifying the lack of parental support.

Please submit to Lehigh University's Office of Financial Aid via the
go.lehigh.edu/finaidoccenter, by mail, or by fax (610)758-6211.

You may also contact our office at (610)758-3181 or financialaid@lehigh.edu