
FAFSA Waiver Form

Student Name: _____

Phone Number: _____

Email Address: _____

I understand that I may complete a Free Application for Federal Student Aid (FAFSA) in order to determine eligibility for federal grants, institutional need-based scholarships, as well as federal and state loans and work study.

By signing below, I am requesting Johnson College Financial Aid Office to waive the requirement of completing the Free Application for Federal Student Aid (FAFSA). I understand that if I do not complete the FAFSA, I am ineligible for federal, state and need-based institutional aid at Johnson College. This includes the following:

Pell Grant
SEOG Grant
Federal subsidized and unsubsidized Loans
Federal Parent PLUS loan
Federal Work Study
Any need-based institutional grant or scholarship offered by Johnson College

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- I will not complete a FAFSA. I am only pursuing private loans.
- Due to Circumstances (SAP, Verification, etc.) I no longer wish to have my completed FAFSA considered for federal loans and I will be pursuing private loans.
- I will not complete a FAFSA; I will pay my bill with _____.

Please note that all payments arrangements must be made prior to the start of the each semester.

Student Signature _____ Date _____

SEND COMPLETED FORM TO:

Office of Financial Aid
Johnson College
3427 North Main Ave
Scranton, PA 18508
financialaid@johnson.edu

OFFICE USE ONLY

Date Received: _____ Initials: _____ Attribute Added in SIS: _____