Financial Aid Application Opt-Out Form		
Financial aid applications inform postsecondary institutions' decisions about student eligibility for federal, state, and institutional funds. Financial aid awards can help students pay for their educational expenses after high school.		
Each high school senior in a Texas public school district or open enrollment charter school must complete and submit a free application for federal student aid (FAFSA) or a Texas application for state financial aid (TASFA) as a state requirement for graduation. Texas Education Code §28.0256 allows a student to opt out of the financial aid application graduation requirement by submitting a signed form that authorizes the parent or student to decline.		
To authorize a student to opt out of the financial aid application graduation requirement, the Financial Aid Application Opt-Out Form must be signed by <u>one</u> of the following:		
OPTION I: A student age 18 years or older or emancipated min OPTION II: (a) The student's parent or guardian (the parent decided) (b) The student's parent or guardian and the student OPTION III: A school counselor, for good cause as determined by	lines to complete the the parent authorize the school counsel	e financial aid application), or zes the student to opt out) or, and the student
Students under 18 years of age may only be authorized to decline under OPTION II or OPTION III.		
Student Printed Name:		Date of Birth:
District/Charter School:	Campus:	
Submitting a Financial Aid Application Opt-Out Form does not prohibit a student from completing and submitting a financial aid application at any time in the future.		
OPTION I: STUDENT AUTHORIZATION		
My signature below certifies that I am 18 years of age or older or an emancipated minor and am authorized to decline to complete and submit a financial aid application on my own behalf.		
Student Signature:	II.	Date:
Student Signature.		Date.
OPTION II: PARENT AUTHORIZATION		
My signature below (check one):	annlication on hobalt	of my shild (naront signature only)
□ certifies that I decline to complete and submit a financial aid application on behalf of my child (parent signature only) □ authorizes my child to decline to complete and submit a financial aid application (parent and student signature required)		
Parent/Legal Guardian Signature:	iciai aid application (Date:
r arenty regar duaration signature.		Dute.
Parent/Legal Guardian Printed Name:		
I am under the age of 18 and with my parent's authorization, I decline to complete and submit a financial aid application.		
Student Signature:		Date:
OPTION III: COUNSELOR AUTHORIZATION		
My signature below certifies that reasonable efforts to fulfill obligations to the student have been made, but for good cause		
I have authorized the student to decline to complete and submit a financial aid application.		
School Counselor Signature:		Date:
School Counselor Printed Name:		
I am under the age of 18 and with my counselor's authorization, I decline to complete and submit a financial aid application.		
	I decline to complete	e and submit a financial aid
	I decline to complet	e and submit a financial aid Date:

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