

- ❖ We have conflicting information regarding your or your parent's marital status.
- ❖ Please indicate your status in the space provided below. **PLEASE COMPLETE IN INK.**
- ❖ The information you provide will be used to verify, update, or correct the information provided on the FAFSA.
- ❖ **The Financial Aid Office reserves the right to request additional documentation necessary to determine your status.**

## A. Student's Marital Status

\_\_\_\_\_  
Student Name

\_\_\_\_\_  
Student ID/SSN

*(Please check the box that applies to you)*

- I am single; never been married.
- I am not married; however, my partner and I live in one household.
- I am married. Date of marriage: \_\_\_\_\_
- I am married; however, I am separated from my spouse. Date of separation: \_\_\_\_\_
- I am divorced. Date of divorce: \_\_\_\_\_
- I am widowed. Date became widowed: \_\_\_\_\_

## B. Parent's Marital Status *(if student is Dependent)*

\_\_\_\_\_ and/or \_\_\_\_\_  
Parent 1 Name Parent 2 Name

*(Please check the box that applies to your parents)*

- I am single; never been married.
- I am not married; however, my partner and I live in one household.
- I am married. Date of marriage: \_\_\_\_\_
- I am married; however, I am separated from my spouse. Date of separation: \_\_\_\_\_
- I am divorced. Date of divorce: \_\_\_\_\_
- I am widowed. Date became widowed: \_\_\_\_\_

## C. Certification and Signature

I certify that all of the information reported on this worksheet is complete and correct. The student must sign this worksheet. A parent's signature is required for dependent students.

**WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.**

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent Signature *(if student is Dependent)*

\_\_\_\_\_  
Date