

PARENT MARITAL STATUS VERIFICATION FORM

Student's Name:	Student ID #:
Please attach documentation (e.g. marriage certifidecree, or death certificate)	cate, court documentation of separation, divorce
Parent Information: To be completed by the paren FAFSA and signed below.	t of a Dependent student who is listed on the
Please indicate your parent's marital status <u>as</u>	reported on the FAFSA:
Married/Remarried Separated Divorced Widowed Single (Never Married) Unmarried parents living together	Date of Marriage: Date of Separation: Date of Divorce: Date Widowed:
2. Please indicate the correct marital status as of	today:
 Married/Remarried Separated Divorced Widowed Unmarried parents living together Single (Unmarried parents not living together) 	Date of Marriage: Date of Separation: Date of Divorce: Date Widowed: Date of Change: Date of Change:
Reason for Change:	
☐ Made an error on original FAFSA☐ Change in marital status (marriage, separation☐ Other (Please Explain):	, divorce, etc.)
Certification Statement: Each person signing below certifies that all information one parent whose information was reported or and one parent whose information was reported or an experience.	ation reported is complete and correct. The studen notes that the FAFSA must sign and date.
Student's Signature:	Date:
Parent's Signature:	Date: