

MOORPARK • OXNARD • VENTURA  
FINANCIAL AID OFFICE

STUDENT MARITAL STATUS VERIFICATION FORM

Student's Name: \_\_\_\_\_ Student ID #: \_\_\_\_\_

**Please attach documentation (e.g. marriage certificate, court documentation of separation, divorce decree, or death certificate)**

**Student Information:** To be completed by the student who completed the FAFSA.

**1. Please indicate your marital status as reported on the FAFSA:**

<input type="checkbox"/>	Married/Remarried	Date of Marriage:	_____
<input type="checkbox"/>	Separated	Date of Separation:	_____
<input type="checkbox"/>	Divorced	Date of Divorce:	_____
<input type="checkbox"/>	Widowed	Date Widowed:	_____
<input type="checkbox"/>	Single (Never Married)		

**2. Please indicate the correct marital status as of today:**

<input type="checkbox"/>	Married/Remarried	Date of Marriage:	_____
<input type="checkbox"/>	Separated	Date of Separation:	_____
<input type="checkbox"/>	Divorced	Date of Divorce:	_____
<input type="checkbox"/>	Widowed	Date Widowed:	_____
<input type="checkbox"/>	Single		

**Reason for Change:**

- ☐ Made an error on original FAFSA  
☐ Change in marital status (marriage, separation, divorce, etc.)  
☐ Other (Please Explain):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**3. Certification Statement:**

Each person signing below certifies that all information reported is complete and correct. The student and one parent whose information was reported on the FAFSA must sign and date.

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Spouse's Signature (optional): \_\_\_\_\_ Date: \_\_\_\_\_