

PARENT MARITAL STATUS VERIFICATION FORM

STUDENT'S NAME _____

STUDENT ID # _____

PARENT MARITAL STATUS

Indicate your parent's correct marital status that should have been reported on the FAFSA or CA Dream Act Application:

Date FAFSA or CA Dream Application was originally filed: _____

- ☐ Married/Remarried
☐ Separated
☐ Divorced
☐ Widowed
☐ Single (Never Married)
☐ Unmarried parents living together

Date of Marriage: _____
Date of Separation: _____
Date of Divorce: _____
Date Widowed: _____

CHANGES TO PARENT MARITAL STATUS

If the marital status has changed since the FAFSA or CA Dream Act Application was filed, indicate the correct 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: _____

****You must attach appropriate documentation regarding marital status changes that occurred after the FAFSA or CA Dream Act Application was filed (e.g. divorce decree, marriage certificate, court documents regarding separation, a death certificate, etc.)***

If additional information is necessary to explain the circumstances regarding changes in marital status, please indicate in the space provided below:

SIGNATURE

The person(s) signing this form certifies that all the information reported on it is complete and correct.

STUDENT SIGNATURE _____

DATE _____

PARENT SIGNATURE _____

DATE _____

