



2019-2020
Change of Marital Status Verification Form for
Student/ Parent (s)

A. Student Information (PLEASE PRINT)

<hr/> Last Name	<hr/> First Name	<hr/> M.I.	<hr/> Social Security Number
<hr/> Address (include apt. no.)			<hr/> Date of Birth
<hr/> City	<hr/> State	<hr/> Zip Code	<hr/> Phone Number (include area code)
<hr/> Email Address			<hr/> Cell Phone Number

If you or parent(s) are divorced or separated, please provide the information below.

Student's Father (Step-Father) Name: _____
Please Print

Physical Address _____
House/Apt No. City, State Zip Code

Telephone Number(s) _____ / _____ / _____
Home Work Cell

Email Address: _____

Student's Mother (Step-Mother) Name: _____
Please Print

Physical Address _____
House/Apt No. City, State Zip Code

Telephone Number(s) _____ / _____ / _____
Home Work Cell

Email Address: _____

Name of Student Spouse (if married): _____
Please Print

Physical Address of Spouse: _____

Date of Divorce: _____ or Date of Separation: _____

Please include three (3) letters from sources that can verify that you are divorced or separated. These letters must be from anyone other than the spouse, children, or immediate family members. Letters should be obtained from a Minister, Church Official, School Official, Marriage Counselor, Judge, or Court Documents. Also include documentation that you your ex-spouse are living at separate physical addresses. Documents must be a rental agreement for both spouses if you are renting or mortgage documents for each spouse if you are purchasing a home. Please include a copy of utility bills for each spouse that show that you receive mail at two different physical addresses. Example: Electric, Gas, Water, Phone, Banking, other statements that will prove that the student (if married) parent(s) lives at two different physical addresses.

If you have a legal separation, please provide court documentation. If you have a divorce, please provide court documentation. While this may resolve conflicts found in your FAFSA data, additional information may be requested. By signing this information request, I certify that all information is complete and correct.

WARNING: If you purposely give false or misleading information on this worksheet, you may receive a fine, a prison sentence, or both.

Student Signature

Spouse Signature

Parent Signature

Witness Signature

Witness Signature

Notary

Seal

Expiration Date