



Student ID: _____ Student Name: _____

Your **Current** Marital Status: *(Please check one)*

| Marital Status: <i>I am currently....</i> | | Date of Status (Change): <i>Month & Year</i> | Required Documentation |
|--|------------------------------------|--|--|
| <input type="checkbox"/> | Married / Remarried | | NONE (You <u>may</u> be required to update your FAFSA if you incorrectly selected “Divorced/Separated”) |
| <input type="checkbox"/> | Legally Separated | | Please provide a signed copy of the separation agreement |
| <input type="checkbox"/> | Separated (But Not Legally) | Date Separated (MM/YY): | Please provide documentation that shows you and your spouse are living in different households. Examples include: lease agreements, mail, utility bills – that clearly show your names and different addresses. |
| | | Date Moved Apart (MM/YY): | |
| <input type="checkbox"/> | Divorced / Widowed | | NONE, except in certain cases a signed copy of the divorce decree may be required if the marital status does not match the filing status of the tax return. |
| <input type="checkbox"/> | Single | | If you are a dependent student, please check your FAFSA to be sure that you did not duplicate your parent’s tax info and report it as your own. Please review and update as necessary; we recommend you use the Data Retrieval Tool if you were a tax filer if possible. |

**NOTE: All information listed should be current as of the day you sign this form.

I certify that all information on this page is accurate and complete to the best of my knowledge. I understand that if I purposely give false or misleading information on this form I may be fined, sentenced to jail; or both.

Student Signature: _____ Date: _____