2015-2016 Marital Status Form-Student

Student Name: __________________________________________ ID#__________________
Phone# (      ) ____________   Email: ____________________________________________

You have reported a marital status on your FAFSA that requires clarification. Please enter a response below that best describes your marital status when you submitted your FAFSA. You may be asked to submit proof.

Parent(s):

☐ Single

☐ Married/Remarried on ________/__________
   Month         Year

☐ Common law married as of ________/__________
   Month         Year

☐ Divorced as of ________/__________
   Month         Year

☐ Widowed as of ________/__________
   Month         Year

☐ Separated as of ________/__________
   Month         Year

Certifications and Signatures

By signing this form, I certify that all information reported on this worksheet is complete and correct to the best of our knowledge. I authorize the Financial Aid Office at TSC to make corrections necessary to resolve any discrepancies found. WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, sentenced to jail, or both. Your parent must sign this form if you are a dependent student. Do not use pencil.

Student________________________________ Parent________________________________ Date_____/_____/____

For office use only: Received by___________