



\_\_\_\_\_  
Last Name

\_\_\_\_\_  
First Name

\_\_\_\_\_  
Student ID

**DEPENDENT STUDENTS**

Complete this form for the parent whose information was included on the FAFSA and verification paperwork.

\_\_\_\_\_  
*Father/Stepfather's Name*

\_\_\_\_\_  
*Mother/Stepmother's Name*

The marital status for this parent is (check one):

- Single
- Widowed
- Divorced
- Separated
- Married/Remarried

Enter the effective date for the marital status listed above. Month \_\_\_\_\_ / Year \_\_\_\_\_

List the physical addresses for both separated spouses:

Student and/or Parent physical address: \_\_\_\_\_

Spouse's physical address: \_\_\_\_\_

**Certification & Signatures:** I certify that the submitted information is true and correct to the best of my knowledge and belief. If asked by an authorized official, I agree to provide additional proof of the information provided on this form. ***If you purposely give false or misleading information you may be fined, sentenced to jail, or both.***

\_\_\_\_\_  
*Student Signature*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Parent Signature (Dependent student only)*

\_\_\_\_\_  
*Date*



**INDEPENDENT STUDENTS**

Your current marital status is (check one):

- Single
- Widowed
- Divorced
- Separated
- Married/Remarried

Enter the effective date for the marital status listed above. Month \_\_\_\_\_ / Year \_\_\_\_\_

Student Physical address: \_\_\_\_\_

Spouse's physical address: \_\_\_\_\_

**Certification & Signatures:** I certify that the submitted information is true and correct to the best of my knowledge and belief. If asked by an authorized official, I agree to provide additional proof of the information provided on this form. ***If you purposely give false or misleading information you may be fined, sentenced to jail, or both.***

\_\_\_\_\_  
*Student Signature (Independent Student only)*

\_\_\_\_\_  
*Date*