2014-2015 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.

☐ Single

☐ Married/Remarried on ________/__________
   Month           Year

☐ Common law married on ________/__________
   Month           Year

☐ Separated on ________/__________
   Month           Year

☐ Divorced/Widowed on ________/__________
   Month           Year

Certifications and Signatures

By signing this form, we certify that all information reported on this worksheet is complete and correct to the best of our knowledge. We 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.

Student_______________________ Parent________________________ Date_____/_____/____

For office use only:  Received by__________