

MARITAL STATUS VERIFICATION

The Financial Aid Office is requesting verification of your marital status.

All sections of this form must be completed and returned with all required documents before eligibility for federal financial assistance can be determined. The information you provide may be used to make corrections to your FAFSA, if required.

Student's name: _____ **Phone:** _____

1. Check the status below that reflects your marital status on the date you filed your initial 2016-17 FAFSA. **This date can be viewed on your 2016-17 Student Aid Report (SAR) at www.fafsa.gov.**

- Married/remarried** as of ____/____/____ (Provide month/day/year of current marriage)
- Divorced and not remarried** as of ____/____/____ (Provide month/day/year of divorce)
- Separated (see #2 below)** as of ____/____/____ (Provide month/day/year of separation)
- Widowed and not remarried** as of ____/____/____ (Provide month/day/year of spouse's death)
- Never married (single)**
- Other (please explain):** _____

2. If you have a *legal separation* attach a copy of your separation agreement. If you **do not have a legal separation** attach proof of separate residences (such as current utility bills) **and** documentation that the marriage is severed. This documentation could include a letter from a reputable third party such as an attorney or clergy person regarding your separation, a copy of a child custody agreement, or a copy of an attorney bill regarding your separation.

3. Has your marital status changed since the day you filed your initial 2016-17 FAFSA?

- Yes**, I am currently _____ as of ____/____/____ (Provide current marital status and month/day/year of status.)
- No**, my marital status has not changed since I filed the FAFSA.

Certification

I certify that all information provided in this document is true, complete and accurate. I understand that if I purposely give false or misleading information I may be fined, sentenced to jail, or both.

Student's signature: _____ **Date:** _____

<p align="center">JCC Financial Aid Office PO Box 20 Jamestown, NY 14702-0020 Jamestown 716.338.1009 1.800.388.8557 ext 1009 Olean 716.376.7512 1.800.388.8557 ext 7512 FAX 716.338.1459 EMAIL financialaid@mail.sunyjcc.edu We recommend you mail your documents via the US Postal Service to protect your personal information.</p>
