



2026-2027 Marital Status Change Form for Student/Parent(s)

Student Information (PLEASE PRINT)

Last Name	First Name	M.I.	Social Security Number
Address (include apt. no.)		Date of Birth	
City	State	Zip Code	Phone Number (include area code)
Email Address		Cell Phone Number	

If you or your parent(s) are divorced or separated, please provide the information below:

Spouse/Student's Father (Step-Father) Name: _____
Please Print

Physical Address _____
House/Apt No. City, State Zip Code

Telephone Number(s) _____ / _____ / _____
Home Work Cell

Email Address: _____

Spouse/Student's Mother (Step-Mother) Name: _____
Please Print

Physical Address _____
House/Apt No. City, State Zip Code

Telephone Number(s) _____ / _____ / _____
Home Work Cell

Email Address: _____

If you/ parent(s) are divorced or separated, please provide the information below:

Date of Divorce: _____ or Date of Separation: _____

If you have a legal separation, provide court documentation. If you have a divorce, provide court documentation. While this may resolve conflicts found in your FAFSA data, additional information may be requested.

By signing this information request, I certify that all information is complete and correct.

WARNING: If you purposely give false or misleading information on this worksheet, you may receive a fine, a prison sentence, or both.

Student Signature	Date	Spouse Signature	Date
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Mother/Stepmother's Signature	Date	Father/Stepfather's Signature	Date
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