



MARITAL STATUS FORM

This verification form is to be completed by: STUDENT PARENT of Dependent student

Student Name: _____ Student ID#: ____ - ____ - ____
 Parent's Name: _____ Phone #: _____
 email: _____

1. What is your marital status? Separated Divorced
2. If separated, is it a legal separation? Yes No
3. What is the date of separation/divorce? _____
4. If married, please attach marriage certificate.

PLEASE PROVIDE OUR OFFICE WITH A COPY OF YOUR LEGAL DOCUMENTS.

Spouse / Former Spouse's Information

Name: _____ Age: _____
 Street Address: _____
 City, State, ZIP: _____ Address Unknown
 Employer: _____ Employer Unknown
 If unemployed, what is their means of support? _____

Child Support – Prior Year

1. Annual child support for ALL children: \$ _____
2. Annual alimony paid to you: \$ _____
3. When will child support end? ____ / ____ / ____

Financial Status

1. Are you employed? Yes No Monthly Salary \$ _____
2. Employer: _____ Length of Employment: _____

3. Are you receiving benefits from Cal Works/TANF? Yes No
4. Are you receiving any other income (i.e. interest income, SSI, pensions, etc.)? Yes No
 If Yes, please indicate: _____

6. Do you still live in the same home as you did prior to the separation/divorce? Yes No
 What are your monthly house payments? \$_____
- Who makes the payments? You Former Spouse Both
7. Do you own other assets such as real estate, CDs, stocks, bonds, etc.? Yes No
 If Yes, please explain: _____

Marital Status

If you are not legally separated/divorced, please explain:

Describe any unusual circumstances regarding your separation/divorce that should be considered:

Certification Statement:

I declare the information provided on this form is true, accurate and complete.

Student Signature _____ Date: ____/____/____
 Parent Signature _____ Date: ____/____/____