

## 2024–2025 Parent Marital Status Verification

Student	's Name:
---------	----------

W#: \_\_\_\_\_

In order to complete your financial aid verification process, additional information is needed regarding your FAFSA parents' marital status. Please read the information below before completing the form. If any documentation is needed, please attach it to this form upon submission.

<u>Who is my FAFSA parent?</u> The parent(s) who provided the greatest portion of your total financial support in the past 12 months. If your biological/legal parents are married to each other, they both would be considered your FAFSA parents. If your biological or legal parents were never married, are currently divorced or separated, or if one biological parent is deceased, your FAFSA parent would be the one who provided the greatest portion of your total financial support in the past 12 months. Additionally, if your FAFSA parent is re-married, that parent's current spouse (i.e., your stepparent) **must** be included in the FAFSA.

- 1. As defined above, please indicate your FAFSA Parent(s): \_\_\_\_\_\_
- 2. What is the current legal marital status of the parent(s) indicated in question 1?
  - Never Married
  - □ Married or Remarried
    - i. Name of spouse: \_\_\_\_
    - ii. Please submit a copy of the marriage certificate for the current marriage
  - Divorced and not living together
    - i. Name of former spouse:
    - ii. Please submit a copy of the divorce decree
  - □ Married, but separated and not living together
    - i. Date of separation:\_\_\_\_
    - ii. Please submit a copy of the Petition for Divorce, if applicable
    - iii. Please submit documentation confirming that both spouses are residing at separate addresses
  - □ Widowed and Unmarried
    - i. Name of deceased spouse: \_\_\_\_\_
    - ii. Please submit a copy of the death certificate
  - □ Unmarried and both legal parents living together.
    - i. Name of other legal parent: \_\_\_\_\_

## **Certification and Signatures**

I hereby certify that the information reported on this worksheet is complete and correct. **Warning:** If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.

Student Signature	Date
Parent Signature	Date

Office of Financial Aid • SLU 10768 • Hammond, LA 70402 • 985-549-2244 • Fax 985-549-5077 A member of the University of Louisiana System