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Financial Aid Office  
 MARST2

**2024 – 2025: Marital Status Worksheet (DEPENDENT STUDENTS)**

*\*CLICK HERE if you are independent\**

Complete the following and attach documentation to verify current marital status of your parent(s).

**Student Name** \_\_\_\_\_ **CCBC ID** \_\_\_\_\_

**Section A:**

**A1. Are both of your biological/adoptive parents currently married to each other?**

<input type="checkbox"/> Yes ⇒	Date of Marriage: _____	<b>Attach Marriage Certificate (SKIP TO SECTION C)</b>
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<input type="checkbox"/> No ⇒	<b>A2. Do they live together?</b>	<input type="checkbox"/> Yes, they live together (SKIP TO SECTION C) <input type="checkbox"/> No, they do not live together (COMPLETE SECTION B)
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**Section B:**

**B1. List the name and date of birth of your biological/adoptive parent who provides the majority of your financial support:**

NAME: _____	DOB: _____
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**NOTE:** If neither of your parents provides the majority of your financial support, list the name/DOB of your parent with the greater income/assets above.

**B2. Has the above-listed parent ever been married (to anyone)?**

<input type="checkbox"/> No, my parent has never been married. (SKIP TO SECTION C)	<input type="checkbox"/> Yes, my parent is/was married. (CONTINUE TO B3 BELOW)
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**B3. What is the above-listed parent's current marital status?**

<input type="checkbox"/> <b>Separated</b> (legally married, living separately from legal spouse)	Date of Separation: _____	<b>Attach recent, dated proofs of address for each spouse</b>
<input type="checkbox"/> <b>Legally Divorced</b> (from student's parent OR former stepparent)	Date of Divorce: _____	<b>Attach Divorce Decree</b>
<input type="checkbox"/> <b>Married</b> (to student's stepparent)	Date of Marriage: _____	<b>Attach Marriage Certificate</b>
<input type="checkbox"/> <b>Widowed</b> (from student's parent or stepparent)	Date Widowed: _____	<b>Attach Death Certificate</b>

**B4. List the full name and date of birth of parent's spouse or former spouse:**

NAME: _____	DOB: _____
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**Section C:**

**C1. Check each item below to indicate that you understand:**

<input type="checkbox"/> The above information is accurate as it relates to my parent(s)' <b>current/most recent</b> marital status (to include stepparents).
<input type="checkbox"/> I have attached documentation of my parent(s)' <b>current/most recent</b> marital status (to include stepparents). If my parent has never been married OR my parents are unmarried, but living together, I understand I <b>DO NOT</b> have to submit supporting documentation.

Student's Signature: _____	Date: _____
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Parent's Signature: _____	Date: _____
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**Warning: Each person signing this worksheet certifies all the information reported is complete and accurate. If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.**  
 Please allow at least 2-3 weeks after ALL documents submitted for review. Check your SIMON account for status updates.  
**All documents must be submitted by the last day of the semester. Financial aid awards are subject to change pending verification.**



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**2024 – 2025: Marital Status Worksheet (INDEPENDENT STUDENTS)**

*\*CLICK HERE if you are dependent\**

Complete the following and attach documentation to verify your (the student's) current marital status

Student Name \_\_\_\_\_ CCBC ID \_\_\_\_\_

**Section A:**

**A1. Have you (the student) ever been married?**

- |   |   |
|---|---|
| <input type="checkbox"/> No, I am single and have <i>never</i> been married.<br>(SKIP TO SECTION B) | <input type="checkbox"/> Yes, I am now or have previously been married.<br>(CONTINUE TO A2 BELOW) |
|---|---|

**A2. What is your (the student's) current marital status?**

<input type="checkbox"/> <b>Separated</b> (legally married, living separately from legal spouse)	Date of Separation: _____	<input type="checkbox"/> Attach recent, dated proofs of address for each spouse
<input type="checkbox"/> <b>Legally Divorced</b>	Date of Divorce: _____	<input type="checkbox"/> Attach Divorce Decree
<input type="checkbox"/> <b>Married</b>	Date of Marriage: _____	<input type="checkbox"/> Attach Marriage Certificate
<input type="checkbox"/> <b>Widowed</b>	Date Widowed: _____	<input type="checkbox"/> Attach Death Certificate

**A3. List the full name and date of birth of spouse or former spouse:**

NAME: _____	DOB: _____
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**Section B:**

**B1. Check each item below to indicate that you understand:**

- The above information is accurate as it relates to my **current/most recent** marital status.
- I have attached documentation of my **current/most recent** marital status. If I am single and have never been married, I understand I **DO NOT** have to submit supporting documentation.

Student's Signature: _____	Date: _____
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