



SOLANO  
COMMUNITY COLLEGE

Office of Financial Aid

# 2019–2020 MARITAL STATUS

Complete this form if you or your parents (if dependent student) experienced a marital status change since you submitted your 2019-2020 FAFSA or you answered the marital status incorrectly. Completion of this form does not guarantee approval of your request. **The deadline for submitting this form is June 30, 2020.**

## Section A: Complete all of the items in this section.

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

SCC ID: \_\_\_\_\_ Phone number: \_\_\_\_\_

Mailing Address \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

<b>Marital Status Change/Correction is for:</b> <input type="checkbox"/> Student <input type="checkbox"/> Parent	
<p><b>Marital Status When FAFSA Was Filed</b> Check one and enter date:</p> <p><input type="checkbox"/> Single    <input type="checkbox"/> Married    <input type="checkbox"/> Separated</p> <p><input type="checkbox"/> Divorced    <input type="checkbox"/> Widowed</p> <p>Date: _____</p>	<p><b>Marital Status Changed To</b> Check one and enter date:</p> <p><input type="checkbox"/> Single    <input type="checkbox"/> Married    <input type="checkbox"/> Separated</p> <p><input type="checkbox"/> Divorced    <input type="checkbox"/> Widowed</p> <p>Date: _____</p>

## Section B: If the marital status change request is for you (student), complete this section.

Spouse's Name: \_\_\_\_\_

Current Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

When was the last year you filed a joint federal income tax return: \_\_\_\_/\_\_\_\_/\_\_\_\_

## Section C: If the marital status change request is for your parent(s), complete this section.

Father/Step-Father's Name: \_\_\_\_\_

Mother/Step Mother's Name: \_\_\_\_\_

Current Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

When was the last year you filed a joint federal income tax return: \_\_\_\_/\_\_\_\_/\_\_\_\_

**Section D: Financial Aid staff complete this section**

Required Documentation	Student	Spouse	Parent(s)	Documents Submitted
A typed statement (letter) that explains the marital status change				
Separation Agreement or Court Documentation				
Divorce Decree				
Marriage Certificate				
Death Certificate				
Utility bills (telephone, water, electricity)				
Lease, rental, or mortgage agreement				
Bank Statements				
2016 IRS Tax Return Transcript or Signed, Income Tax Return				
2016 W-2 Form(s) or 1099, or other earnings statement				
Other:				

***I certify that the information provided on this form and any attachments is true and correct to the best of my knowledge. I understand that this information will be used to determine my eligibility and that false or misleading information may be cause for denial, termination, and/or repayment of financial aid funds.***

**Student Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Parent Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**For Financial Aid Office Use Only:**

**Approved**

**Denied:** \_\_\_\_\_

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