



Marital Status Form

2024-2025 Academic Year

Student's Name (please print): _____ Student ID: _____

Your application for financial aid indicates that as of the date the FAFSA was signed ***you or your parent's*** marital status was "separated" or "divorced." In order to complete our process, additional documentation is required verifying that you *or your parent* was separated or divorced and are not receiving spousal support other than child support or alimony.

Please fill in the blank with the option corresponding to your situation and have the statement notarized.

Option 1. Separation

I, _____, certify that I am separated from	
(Print Name)	
my spouse, _____ as of _____.	
(Print Name)	(Month/Year)
_____	_____
(Signature of separated student or separated parent)	(Date)

Option 2. Divorce

I, _____, certify that I am divorced from	
(Print Name)	
my spouse, _____ as of _____.	
(Print Name)	(Month/Year)
_____	_____
(Signature of divorced student or divorced parent)	(Date)

NOTARIAL CERTIFICATE FOR ACKNOWLEDGMENT

_____ County, North Carolina

I certify that the following person(s) personally appeared before me this day, each acknowledging to me that he or she signed the foregoing document:

_____ (Name(s) of principal(s)) _____ (Date)

(Official Seal)

(Official Signature of Notary)

_____, Notary Public
(Notary's printed or typed name)

My commission expires: _____