



Student Name: _____ Social Security Number: _____

I am completing this form to request an update to my marital status. My marital status was correct as of the FAFSA application date, but has subsequently changed.

What is your marital status as of today?

- _____ Married/Remarried
_____ Separated
_____ Divorced/Widowed

Will your spouse or any of their dependents be enrolled at least half-time in college between July 1, 2017 and June 30, 2018? _____

Month and year your marital status changed? _____

What was your spouse's adjusted gross income for 2015? _____

What was your spouse's income tax for 2015? _____

How many exemptions did your spouse claim for 2015? _____

How much did your spouse earn from working in 2015? _____

As of today, what is your spouse's total current balance of cash, savings and checking accounts (separate from what you already reported for yourself on your FAFSA)? _____

As of today, what is the net worth of your spouse's investments including real estate? Do not include the home you live in. _____

As of today, what is the net worth of your spouse's current business and /or investment farm?

Don't include a family farm or family business with 100 or fewer full-time employees. _____

Please provide supporting documentation such as: marriage license, separation/divorce decree, death certificate, etc.

By signing this form, I affirm that all information on this form and any attachments are complete and accurate to the best of my knowledge. If requested, I agree to provide documentation to support the information I have provided on this form. I understand that any false statements or misrepresentation may be cause for denial, reduction, withdrawal, and/or repayment of financial aid, and I may be subject to a fine, imprisonment, or both under provisions of the United States Criminal Code.

Student Signature _____ Date _____

Parent Signature (If Dependent) _____ Date _____