



**Dependent Student**

**CERTIFICATION AND STATEMENT OF MARITAL SEPARATION**

Please complete this certification with names, dates, social security numbers, addresses, signatures and return to the Financial Aid Office.

Student Name: \_\_\_\_\_ Student ID Number: \_\_\_\_\_

I, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_,  
Name (Custodial Parent) Social Security Number (Custodial Parent)

Certify that I have been living separated from my spouse, \_\_\_\_\_,  
Separated Spouse

\_\_\_\_\_, since \_\_\_\_\_,  
Social Security Number (Separated Spouse) Date of Separation

I also certify that we have **continued** in this state of separation until this present date. At current we reside at the following different addresses:

_____	_____
Custodial Parent Name	Separated Spouse Name
_____	_____
Street Address	Street Address
_____	_____
City, State, Zip Code	City, State, Zip Code

Our signatures below certify that the above information is **true** and **accurate**. Our signatures also certify that both parties are in total agreement with the term of separation as applied to our marital status to date.

_____	_____
Custodial Parent Signature	Date
_____	_____
Separated Spouse Signature	Date
_____	_____
Student Applicant Signature	Date