



Independent 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.

I, _____, _____,
Name Social Security Number

Certify that I have been living separated from my spouse, _____,
Spouse

_____, since _____,
Spouse Social Security Number 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:

Student 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.

Student Signature

Date

Separated Spouse Signature

Date