	IARPAR - Idaho State University25-26MARITAL STATUS REQUEST	MARPAR-26
provided on called verific Financial Ai information	government requires colleges to check the accuracy of the information you your Free Application for Federal Student Aid ( <u>FAFSA</u> ). This process is cation. You must complete the verification process before the Office of d can establish your eligibility for assistance. You must return the requested on this form or you will not be considered for federal financial return this completed form with attachment(s) to:	
921 S 8 <sup>th</sup> Av Phone: (20	nancial Aid, Idaho State University, Museum Building, Third Floor ve, Stop 8077, Pocatello, ID 83209-8077 3)282-2756 Fax: (208)282-4755 Email: <u>financialaid@isu.edu</u> pload: <u>isu.edu/financialaid/upload</u>	
*Student N		
(Use blue or bla	ck ink) Last First	M.I.
*ISU ID:	*Last 4 Digits of Social Sec	:uritv #:
	f on MyISU)	*Required
<ul> <li>If your parents are divorced or separated, answer the questions about the parent you lived with more during the past 12 months. (If you did not live with one parent more than the other, give answers about the parent who provided more financial support during the past 12 months or during the most recent year that you actually received support from a parent.) If this parent is remarried as of today, answer the questions about that parent and your step-parent.</li> <li>INSTRUCTIONS: Report your parent(s) marital status as of the date you signed your <u>FAFSA</u>. If your parent(s) marital status changes after you signed your FAFSA, you cannot change this information.</li> </ul>		
We must verify your parent(s) marital status. As of the <u>date</u> the initial <u>FAFSA</u> was signed by you for this year, your parent(s) marital status was:		
	Single-Never Married.	
	Unmarried, and both legal parents living together.	
	Married/Remarried – Date of Marriage: parent(s) marriage license to this form and return to the address above.	. Please attach a copy of your
	Divorced/Separated – Date of Divorce/Separation:	e/ <b>OR</b> court documents of to the address above.
	Widowed – Date Widowed: Please certificate to this form and return to the address above.	e attach a copy of the death
<b>CERTIFICATION:</b> The person signing below certifies that all of the information reported is complete and correct. <i>WARNING: If you purposely give false or misleading information, you may be fined, sent to prison, or both.</i>		
Parent Sig	nature:	Date: