FINANCIAL AID AND VETERANS SERVICES
Illinois Valley Community College

2023−2024
Marital Status Review Form

Student Name: _____ **ID # or SSN:** _____

What is your **current** marital status? (Please circle)

Single   Married, Remarried   Separated   Divorced, Widowed

Date the above status was effective (month/day/ year): _____

I certify that this information is correct and will verify the accuracy of this information if needed.

_____   _____
Student Signature   Date

To be completed by the parent who signed the student's FAFSA:
(If applicable)
To determine correct parent name(s) to list below, select one of the following:
- ☐ If the student's parents are married to each other or are not married to each other and live together, answer the questions about both parents.
  - ○ Submit tax transcripts for both.
- ☐ If the student's parent listed on the FAFSA is married, list that parent and their spouse (student's stepparent).
  - ○ Submit tax transcripts for both.
- ☐ If the student's parents are not married to each other and do not live together, and the parent listed on the FAFSA is not married, list that parent.
  - ○ Submit tax transcript for that parent.
- ☐ If the student's parent listed on the FAFSA is married but is separated (does not live with spouse), list that parent.
  - ○ If tax filing status is married filing joint, submit tax transcripts and W2's for both parents.

Parent Name(s): _____

What is your **current** marital status? (please circle)

Never Married   Married, Remarried   Divorced   Separated   Widowed

Unmarried and both parents living together

Date the above status was effective (month/day/ year): _____

I certify that this information is correct and will verify the accuracy of this information if needed.

_____   _____
Parent Signature   Date
(if applicable)