

unun	the verification process h	ias been completed.							
E-MAIL ADDRESS:					PHONE #:				
								RUCTIONS: Your PARENT cial Aid Office for review.	must complete this form, attach any
A.	MARITAL STATUS	'e 2016 2017 EAESA my marital eta	atue wae:			REQUIRED DOCUMENTATION			
	In the day I signed my child's 2016-2017 FAFSA, my marital status was: Unmarried and both parents living toget					·			
	Married/Re-married	Date of Marriage:			YYYY	A copy of your marriage license			
	Widowed	Date you were Widowed:	MM	l_	YYYY	A copy of the death certificate or obituary notice)		
	Divorced	Date of Divorce:	MM	I_	YYYY	 A copy of your divorce papers □ Check here if you believe you have submithe divorce papers in a previous year and specify the year: 	tted		
	Separated (with papers)	Date of Separation:	MM	I_	YYYY	A copy of your LEGAL separation papers			
B.	DECLARATION OF SEP	ARATION (complete this section onl	y if you are	sep	arated and	nd do not have legal separation papers)			
	I have been separated from my spouse,						e legal		
	aration papers but have be	en living apart continuously with no		conci	le since the	he month and year indicated above. I am attaching TV	VO (2)		
-	An official letter from a reputable third party who can confirm my marital separation in their professional capacity (ex. employer; religious/spiritual leader; marriage counselor; landlord; etc.).				An official letter from a social services agency (ex. DSS, Social Security, etc.) indicating their knowledge of my marital separation AND confirming that I am considered separated for the purposes of				
_	A copy of my lease, rental or mortgage documents.					ogram OR that lists all household members by name			
-	 Most recent two (2) months utility bills for EACH spouse confirming separate households. 				 Copy of my SIGNED 2015 IRS TAX RETURN TRANSCRIPT. (available at www.irs.gov) NOTE: If you separated before December 31, 2015, and filed a joint return with your estranged spouse, you 				
-	Legal documents showing child support obligations. For members of the military or their dependents: a letter from the Family Services Office Unit Chaplain, or Unit S-1 Personnel Office why y					include an official letter from your paid tax preparer that explains			
-					why you filed jointly. OTHER: Please Specify:				
C.	CERTIFICATION AND SI	GNATURE							
Ву		Il information reported on this form a	and any sup	port	ng docum	mentation is true and complete.			

WARNING: If you purposely provide false or misleading information on this worksheet, you may be fined, sentenced to jail, or both.

RETURN THIS COMPLETED FORM WITH REQUIRED DOCUMENTATION TO:

Wayne Community College - Financial Aid Office - PO Box 8002 - Goldsboro, NC 27533-8002 FAX: 919-736-9425 - EMAIL: wcc-finaid@waynecc.edu