

STUDENT NAME: _____

WCC ID #: _____

The Financial Aid Office needs to verify your marital status as of the date the 2019-2020 FAFSA was completed. ***This form must be completed in blue or black ink and signed in the presence of a notary.*** PLEASE NOTE – Your eligibility for financial aid cannot be determined until the verification process has been completed.

On the day I signed the 2019-2020 FAFSA, my marital status was:

- Single
- Married OR Remarried Widowed
- Full date of marriage: ____/____/____ • Month and year of death: ____/____
- Divorced
- Month and year the divorce was finalized: ____/____

Separated

• Complete the following statement: I, _____, am separated from my spouse,
PRINT STUDENT NAME
 _____, since ____/____. We have been living in
PRINT SPOUSE'S NAME MONTH YEAR
 separate households and have no plans to reconcile.

My address is: _____ My spouse's last known address is:
 _____ _____
 Street (no PO Boxes) Street (no PO Boxes)
 _____ _____
 City, State, ZIP City, State, ZIP

I understand that my marital status is subject to investigation by the proper authorities. If I purposely provide false or misleading information in an attempt to receive federal aid, I may be fined up to \$20,000, sentenced to prison, or both.

STUDENT SIGNATURE: _____
 (MUST BE SIGNED IN THE PRESENCE OF A NOTARY)

OATH OR AFFIRMATION

State of _____

County of _____

Signed and sworn to (or affirmed) before me this day by
 (Printed name of signer), _____.

NOTARY SEAL

Date: _____

My Commission Expires: _____

 NOTARY SIGNATURE

 NOTARY'S PRINTED NAME

RETURN THIS COMPLETED FORM TO:

**Wayne Community College - Financial Aid Office - PO Box 8002 - Goldsboro, NC 27533-8002
 FAX: 919-736-9425**