

This form is used to verify demographic information as a result of a mismatch from the information listed on the Free Application for Federal Student Aid (FAFSA). The mismatch information must be resolved before financial aid can be awarded. Please give the information asked below for only the parent(s)/stepparent(s) listed on the FAFSA.

_____	_____	_____	_____
Last Name	First Name	M.I.	Student ID
_____	_____	_____	_____
Street Address	City	State	Zip
_____	_____	_____	_____
			Phone Number

**1. Please print or type name exactly as it appears on the social security card.**

**Student Information**

_____	_____	_____	_____
First	Last	Date of Birth	Social Security

**Spouse Information**

_____	_____	_____	_____
First	Last	Date of Birth	Social Security

**2. Student's Marital Status:** (select one)

- a. If student marital status is divorced or separated, please provide documentation of divorce or separation and proof of income for. if student marital status is married/remarried, please provide income for student and spouse.

Single       Married       Remarried       Divorced       Widowed       Separated

- b. Month and year the marriage, divorce, separation, widow, or cohabitation occurred: \_\_\_\_\_

**3. Number in Household**

- a. Number of people in the household that receive more than half of their support from the student listed on the FAFSA: \_\_\_\_\_

- b. From the number listed above, how many will be at least a half time student attending a post-secondary educational institution in 2022-2023 : \_\_\_\_\_

I (We) hereby affirm that all information reported on this form and any attachment hereto is true, complete, and accurate to the best of my (our) knowledge. I (We) understand that if I (we) receive federal student aid based on incorrect information, I (we) will need to repay it; I (we) may be required to pay fines and fees.

Student Signature \_\_\_\_\_

Date \_\_\_\_\_

Spouse Signature \_\_\_\_\_

Date \_\_\_\_\_