

2019-2020 Clarification of Marital Status

You are receiving this form because the marital status you and/or your parents reported on FAFSA does not match the reported 2017 IRS tax return filing status. Please complete and submit this form to the Financial Aid Office. TVCC may also require additional documentation based on the responses on this form.

Student ID Number: _____

Name: _____

Student's Marital Status	Parent's Marital Status (if dependent student)
<p>What was your tax filing status according to your 2017 IRS Tax Return? Select only one option.</p> <p><input type="checkbox"/> Single <input type="checkbox"/> Married filing joint return <input type="checkbox"/> Married filing separate return <input type="checkbox"/> Head of Household <input type="checkbox"/> Qualifying Widow(er) <input type="checkbox"/> Did not file 2017 tax return</p>	<p>What was your parent's tax filing status according to their 2017 IRS Tax Return? Select only one option.</p> <p><input type="checkbox"/> Single <input type="checkbox"/> Married filing joint return <input type="checkbox"/> Married filing separate return <input type="checkbox"/> Head of Household <input type="checkbox"/> Qualifying Widow(er) <input type="checkbox"/> Did not file 2107 tax return</p>
<p>What was your marital status as of the day the FAFSA was filed? Select only one option.</p> <p><input type="checkbox"/> Single <input type="checkbox"/> Married/Remarried <input type="checkbox"/> Separated <input type="checkbox"/> Divorced/Widowed</p> <p>Date of student's marital status? _____</p>	<p>Your parent's (including step-parents) marital status as of the day the FAFSA was filed? Select only one option.</p> <p><input type="checkbox"/> Married/Remarried <input type="checkbox"/> Never married <input type="checkbox"/> Divorced /Separated <input type="checkbox"/> Widowed <input type="checkbox"/> Unmarried and both parents living together</p> <p>Date of parent's marital status? _____</p>

Please explain why you were allowed to use the filing status listed above given your marital status on the FAFSA. Please include date of marital status change, if applicable.

By signing this form, I certify the information reported is true and accurate. Adobe or signature type fonts will not be accepted. **Please submit all completed forms to the TVCC Financial Aid Office by email (PDF format ONLY) to finaid@tvcc.cc, fax 541-881-5528 or mail 650 College Blvd, Ontario, OR 97914. You may also submit forms in the Ontario Student Service Center or the Caldwell Center.**

Student signature Date Parent signature (dependent student only) Date