



<b>2018-2019</b>	<b>STUDENT'S MARITAL &amp; TAX STATUS</b>
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Student's Last Name \_\_\_\_\_ Student's First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_ Student's Social Security Number \_\_\_\_\_

Read each marital status and select the one that best reflects your marital status for each section. Both sections must be completed, leaving any section blank will result in an incomplete form.

**What is your Marital Status as of December 31, 2016?**

- Single** – not Married, not Re-married, or not considered Common Law Married
- Married** – legally married or considered Common Law Married through the State of Texas  
Date of Marriage (mm/dd/yyyy): \_\_\_\_\_
- Divorced** – You have obtained a Final Divorce Decree and you have not remarried  
Date of Divorce (mm/dd/yyyy): \_\_\_\_\_
- Separated** – not living together, consider marriage to be severed, and reasonable to assume spouse is not returning to the home  
Date of Separation (mm/dd/yyyy): \_\_\_\_\_
- Widowed** – Widowed and have not remarried  
Date Widowed (mm/dd/yyyy): \_\_\_\_\_

Further documentation or clarification may be requested from you based on your answers to the above information.

**What is your Marital Status as of the date you successfully submitted your 2018/19 FAFSA?**

- Single** – not Married, not Re-married, or not considered Common Law Married
- Married** – legally married or considered Common Law Married  
Date of Marriage (mm/dd/yyyy): \_\_\_\_\_
- Divorced** – You have obtained a Final Divorce Decree and you have not remarried  
Date of Divorce (mm/dd/yyyy): \_\_\_\_\_
- Separated** – not living together, consider marriage to be severed, and reasonable to assume spouse is not returning to the home  
Date of Separation (mm/dd/yyyy): \_\_\_\_\_
- Widowed** – Widowed and have not remarried  
Date Widowed (mm/dd/yyyy): \_\_\_\_\_

Further documentation or clarification may be requested from you based on your answers to the above information.

- I Married/remarried after the date I first signed and submitted the 2018/19 FAFSA**  
Date of Marriage (mm/dd/yyyy): \_\_\_\_\_

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

**Warning: If you purposely give false or misleading information, you may be fined, sentenced to jail, or both.**

**PLEASE RETURN ALL FORMS AND DOCUMENTATION—list student's name and Social Security Number at top of all documents**

Cisco College Financial Aid Office  
101 College Heights  
Cisco, Texas 76437  
www.cisco.edu

Turn in to either campus location Cisco  
Phone: 254-442-5153  
Abilene: 325-794-4417  
Fax: 254-442-1090

Office Use:

IF Emailing send directly to your financial aid counselor