

**Hinds Community College
2009-2010 Marriage Status Form**

Please read carefully and answer all questions as it relates to you.

Last name	First Name	M.I.	Social Security Number
Address (Include apt. no.)			Date of birth
City	State	ZIP code	Phone number (include area code)

STUDENT

As of the date you filed your FAFSA, what is your marital status?

- Married/Remarried
- Single
- Divorced/Separated.
- Widowed

Month and year you were married, separated, divorced or widowed.

____ Month ____ Year

If you were born before January 01, 1985, or are a veteran, skip the parent portion of this form.

PARENT(s)

As of the date you filed your FAFSA, what is your parents' marital status?

- Married/Remarried
- Single
- Divorced/Separated.
- Widowed

Month and year you were married, separated, divorced or widowed.

____ Month ____ Year

Father's/Stepfather's

Name: _____

Date of Birth: _____

Social Security Number: _____

Mother's/Stepmother's

Name: _____

Date of Birth: _____

Social Security Number: _____

By signing this worksheet, I (we) certify that all the information reported on this form is complete and correct.

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

____ Student _____ Date

____ Parent / Stepparent (if applicable) _____ Date