## 2022-2023 Form P Parent Marital Status

Your child's 2022-2023 FAFSA was selected for review in a process called "Verification." In this process, the financial aid office will compare the information reported on your FAFSA with the information on this form and any other required documentation. The law states that we have the right to ask for confirmation of this information before awarding federal student aid. You and your child whose information was reported on the FAFSA must sign this form, attach any required documentation, and submit the completed package to the LCC Financial Aid Office. If there are differences between the information reported on your FAFSA and the documents submitted to our office, we will make the necessary corrections. We retain the right to request additional information as needed to complete your child's file. If you have any questions about the verification process, contact the Financial Aid Office as soon as possible to avoid a delay in processing your request for financial aid. <b>**Your child's eligibility for financial aid cannot be determined until the verification process is complete.**</b>		
Student Na	ame: LCC ID#/Last Four of SSN#:	
Address:	City: State: Zip:	
Check the	box for the marital status relates to the parent:	
	Widowed If you are widowed, provide the month and year of death/	
	Divorced If you are divorced, provide the month and year divorce was finalized/	
	Separation Please complete the following: I,,	
	am separated from my spouse,	
	since We are no longer residing together at the same residence.	
	My address is:	
	<u>ommunity college</u>	
	My spouse's address is (if known):	
	Married If you are married, provide the full date of marriage//	
Certificatio	n:	
	ertify that the submitted information is accurate to the best of my knowledge and belief. If asked by authorized official, I agree to provide additional proof of the information provided on this form.	
WARNING: If you purposefully give false or misleading information on this form, you may be fined, sentenced to jail, or both.		
Student Si	Student Signature Date	
Parent Sig	Parent Signature Date	
	MAIL OR FAX THE COMPLETED FORM AND SUPPORTING DOCUMENTATION TO:	