

SEPARATION CONFIRMATION FORM

Student Information:

Name:	ID/SSN:
Phone:	Email:

Parent Information:

Name:	Email:
Address:	City:
State:	Zip:

I, the undersigned, do affirm that my spouse and I are separated, not living together, and I am not receiving financial spousal support from him or her. The financial information that I have provided the student to receive Title IV aid is complete and accurate. My separation status has not changed since I reported this information.

Date of separation status _____

Date divorce decree will be official _____

Are you receiving child support? YES NO

If you are receiving child support, how much are your monthly payments _____

Separated spouse information NOT used for FAFSA income:

Name: _____

Address: _____ City: _____ State: _____ Zip: _____

By signing this application, I certify and understand by purposely giving false or misleading information, I may be fined \$20,000, sent to prison or both.

Parent Signature: _____ Date: _____

Sworn to before me this _____ day of _____, 20_____.

SEAL

Notary Public
My Commission expires: _____