



You are receiving this form because your parent changed their marital status on the FAFSA® after the original filing date. Your parent must report the marital status as of the date you originally signed the FAFSA. Please provide the information below.

Student name _____

COCC ID number _____

What was your parent’s marital status as of the day the FAFSA® was originally filed? Select only one option.

- Never Married
- Unmarried and living together
- Married
- Remarried
- Separated
- Divorced
- Widow(er)

What is the date of the most recent marital status change?

MM/YYYY

Please indicate why the marital status on the FAFSA® was changed after the original filing date.

By signing this form, I certify the information reported is true and accurate. Adobe or signature type fonts cannot be accepted.

Student signature _____

Date _____

Parent signature _____

Date _____