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## 2026-2027 STUDENT MARITAL STATUS VERIFICATION FORM

### SECTION A: STUDENT INFORMATION

STUDENT NAME: \_\_\_\_\_ STUDENT ID: \_\_\_\_\_

Your application has been selected for verification. We are required by federal law (34 CFR, Part 668) to compare the information from your Free Application for Federal Student Aid (FAFSA) with the information on this form.

**PLEASE NOTE:**

- ✓ We cannot continue processing your financial aid until all required financial aid documents have been submitted.
- ✓ All required documents must be uploaded to your Financial Aid Student Self-Service Portal.
- ✓ We will update your FAFSA, if needed, based on the information provided on this form.

### SECTION B: STUDENT MARITAL STATUS

1. CHECK YOUR CORRECT MARITAL STATUS AS OF THE DATE YOU FILED YOUR INITIAL 2026-2027 FAFSA APPLICATION. (IF STATUS HAS CHANGED SINCE INITIAL FAFSA WAS FILED, CONTACT THE STUDENT ONE STOP CENTER.)

- ☐ MARRIED/REMARIED AS OF \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ (Provide month/day/year of current marriage)
- ☐ DIVORCED (NOT REMARRIED) AS OF \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ (Provide month/day/year of divorce)
- ☐ SEPARATED (LIVE TOGETHER) AS OF \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ (Provide month/day/year of separation)
- ☐ SEPARATED (LIVE AT SEPARATE ADDRESSES) AS OF \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ (Provide month/day/year of separation)
- ☐ WIDOWED (NOT REMARRIED) AS OF \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ (Provide month/day/year of spouse's death)
- ☐ NEVER MARRIED (SINGLE)
- ☐ OTHER PLEASE EXPLAIN: \_\_\_\_\_

2. IF ANSWER TO QUESTION 2 IS "SEPARATED", DO YOU INTEND TO PROCEED WITH A DIVORCE? ☐ YES ☐ NO

IF NO, WHY NOT? \_\_\_\_\_

3. HAS YOUR MARITAL STATUS CHANGED SINCE THE DAY YOU FILED THE INITIAL 2026-2027 FAFSA?

☐ NO, MY MARITAL STATUS HAS NOT CHANGED SINCE I FILED THE FAFSA.

☐ YES, CURRENT MARITAL STATUS IS \_\_\_\_\_ AS OF \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
 (CURRENT STATUS) (MONTH/DAY/YEAR)

### SECTION C: CERTIFICATION

By typing my name below, which serves as my electronic signature, I certify the information on the form and any associated documents submitted are accurate and complete to the best of my knowledge and that there is no forgery. The information supplied on this form supersedes that which was provided on the FAFSA. I understand that any false statements or misrepresentation may be cause for denial, reduction, withdrawal, and/or repayment of financial aid, and I may be subject to a fine, imprisonment or both, under provisions of the United States Criminal Code.

STUDENT'S SIGNATURE: _____	DATE: _____
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