

**FORM MARPAR - IDAHO STATE UNIVERSITY
PARENT MARITAL STATUS REQUEST**

10-11

MARPAR-11

The federal government requires colleges to check the accuracy of the information you provided on your Free Application for Federal Student Aid (FAFSA). This process is called verification. You must complete the verification process before the Office of Financial Aid can establish your eligibility for assistance. You must return the information requested on this form or you will not be considered for federal financial aid. Please return this completed form to:

**Office of Financial Aid, Idaho State University, Museum Building, Room 337
921 S 8th Ave, Stop 8077, Pocatello, ID 83209-8077
Phone: (208)282-2756 Fax: (208)282-4755**

Student Name: _____
(Use blue or black ink) Last First M.I.

ISU ID (Bengal Card #): _____ Social Security #: _____

Telephone: _____ Email: _____

Who is considered a parent on this form:

- If your parent is widowed or single, answer the questions about that parent.
- If your widowed parent is remarried as of the day you signed your FAFSA, answer the questions about that parent and your step-parent.
- If your parents are divorced or separated, answer the questions about the parent you lived with more during the past 12 months. (If you did not live with one parent more than the other, give answers about the parent who provided more financial support during the past 12 months, or during the most recent year that you actually received support from a parent.) If this parent is remarried as of today, answer the questions about that parent and your step-parent.

INSTRUCTIONS: Report your parent(s) marital status as of the date you signed your FAFSA. If your parent(s) marital status changes after you signed your FAFSA, you cannot change this information.

We must verify your parent(s) marital status.

As of the date the initial FAFSA was signed your parent(s) marital status was:

- Married/Remarried – Date of Marriage: _____. Please attach a copy of your parent(s) marriage license to this form and return to the address above.
- Divorced/Separated – Date of Divorce/Separation: _____. Please attach the front page and last page with signatures of your parent(s) divorce decree/**OR** court documents of separation or documentation of separate residences to this form and return to the address above.
- Widowed – Date Widowed: _____. Please attach a copy of the death certificate to this form and return to the address above.

CERTIFICATION: I certify that the information provided above is true and complete to the best of my knowledge.

Signature: _____

Date: _____