



OFFICE OF FINANCIAL AID  
financialaid@edgecombe.edu

Tarboro Campus:  
2009 W. Wilson Street  
Tarboro, NC 27886  
T: 252.823.5166  
F: 252.824-3390

Rocky Mount Campus:  
225 Tarboro Street  
Rocky Mount, NC 27801  
T: 252.446.0431  
F: 252.824-3390

### Student's Marital Status Confirmation

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

Check the appropriate box below and attach the requested documentation.

- MARRIED / REMARRIED:** (Circle which one applies) Attach a copy of the marriage certificate.  
I, \_\_\_\_\_, am married. I am not separated with the intent to divorce.  
(Please print your name)
- SEPARATED:** Attach a copy of the legal separation papers. *If you were separated when the FAFSA was completed and are now divorced, you may provide a copy of the divorce decree.*  
I, \_\_\_\_\_, and \_\_\_\_\_,  
(Please print your name) (Please print spouse's name.)  
have been separated and living apart with the intent to divorce since \_\_\_\_\_.  
(Date: month/year)

My address: Street Address: \_\_\_\_\_  
City, State \_\_\_\_\_ Zip \_\_\_\_\_

My spouse's address: Street Address: \_\_\_\_\_  
City, State \_\_\_\_\_ Zip \_\_\_\_\_

#### IF YOU DO NOT HAVE LEGAL SEPARATION PAPERS, YOU SHOULD SUBMIT ONE OF THE FOLLOWING

- For military and their dependents: A signed letter on letterhead is required from the Family Services Office, Unit Chaplain, or the Unit S-1 Personnel Office.
- For civilians: A signed letter is required from a clergyman, a lawyer, or your employer on letterhead.
- If the above items are unattainable, please attach a signed, notarized (if student is not appearing in person) statement describing your separation and the circumstances preventing you from obtaining these items along with one of the following:
  - a dated Lease/Rental Agreement that lists the names of the people living in the home,
  - a letter from a Shelter Administrator,
  - utility bills from each party from the same month (prior to the FAFSA completion date) showing two different physical addresses, or
  - DSS documentation of qualifying household members used when applying for benefits.
- ✓ I understand that my separation is subject to investigation by the proper authorities.
- ✓ I authorize Edgecombe Community College's Financial Aid to make corrections to my original and/or subsequent applications based on the documents that I am now submitting.
- ✓ I certify that the information provided is true and correct

Student's Signature \_\_\_\_\_ Date \_\_\_\_\_