



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: 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.

Student's Signature _____ Date _____



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