Parent Filing Status Discrepancy
2024-2025 *(Fall 2024, Spring 2025, Summer 2025)*

Office of Financial Aid
UNIVERSITY OF COLORADO **BOULDER**

Name: _____   **ID**: _____
　　　　Student's Name (Last, First, M.I.)　　　　　　　　　　Student Identification Number (SID)

This form is to be completed by the primary parent listed on the *Free Application for Federal Student Aid* (FAFSA) in order to verify reported information. We have received conflicting information on your marital status. Please complete questions below to confirm your marital status. Additional tax information will be required after completion of this form. Check your email for next steps.

_____　　　　_____
Parent's Name (Last, First, M.I.) Please print　　　　**Parent Date of Birth** (Day/Month/Year)

Parent's Address as of the date your student's 2024-25 FAFSA was originally completed.

1. Were you living at the address above as of July 1, 2022?　　☐ Yes　　　☐ No

2. What was your tax filing status on your 2022 federal income tax return?

☐ Single　☐ Head of Household　☐ Married—filed joint return　☐ Married—filed separate return　☐ Widow(er)

3. Select the option that best describes your marital status on the day your student's 2024-25 FAFSA was completed and answer the questions below it. Note: More options are on page 2.

Married/Remarried – (Legal or Common Law) If married, please complete the section below:	
Spouse's Name:	
Marriage Date:	Spouse's Date of Birth:
Did you and your spouse live at the same address for the last 6 months of 2022? ☐ Yes ☐ No, Spouse's address as of July 1, 2022 _____	
Additional documentation you may be asked to submit: tax return transcripts, documentation that shows separate residences (mortgage statements, lease agreements, utility bills, USPS Change of Address receipt, copies of driver's licenses)	

Separated. If separated, please complete the section below:	
Spouse's name:	
Separation Date:	Spouse's Date of Birth:
Spouse's address as of the date your student's 2024-25 FAFSA was originally completed: _____	
Is this a legal separation?　☐ Yes (Also submit the legal separation document)　☐ No	
Is your spouse the student's legal or adoptive parent?　☐ Yes　☐ No	
Additional documentation you may be asked to submit: legal separation documents, W-2(s), tax return transcripts, documentation that shows separate residences (mortgage statements, lease agreements, utility bills, USPS Change of Address receipt, copies of driver's licenses)	

PLEASE SEE OTHER SIDE FOR REMAINDER OF FORM, INCLUDING SIGNATURE CERTIFICATION

Please submit your form by mail or online at www.colorado.edu/financialaid/forms/secure-document-upload
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Name: _____   **ID**: _____
Student's Name (Last, First, M.I.)   Student Identification Number (SID)

<table>
<tr><td colspan="2">Unmarried and both parents living together. If unmarried and both living together, please complete the section below:</td></tr>
<tr><td>Other parent's name:</td><td>Other parent's Date of Birth:</td></tr>
<tr><td colspan="2">Is the other parent the student's legal or adoptive parent?   ☐ Yes   ☐ No</td></tr>
<tr><td colspan="2">Additional documentation you may be asked to submit: tax return transcripts</td></tr>
</table>

<table>
<tr><td colspan="2">Divorced. If divorced, please complete the section below:</td></tr>
<tr><td colspan="2">Ex-spouse's name:</td></tr>
<tr><td>Divorce Date:</td><td>Ex-spouse's Date of Birth:</td></tr>
<tr><td colspan="2">Is your ex-spouse the student's legal or adoptive parent?   ☐ Yes   ☐ No</td></tr>
<tr><td colspan="2">Ex-spouse's address as of the date your student's 2024-25 FAFSA was originally completed:

_____</td></tr>
<tr><td colspan="2">Prior to the divorce being finalized, did you and your ex-spouse maintain separate residences?
☐ Yes, Separation Date: _____   ☐ No</td></tr>
<tr><td colspan="2">Additional documentation you may be asked to submit: divorce decree, W-2(s), tax return transcripts, documentation that shows separate residences (mortgage statements, lease agreements, utility bills, USPS Change of Address receipt, copies of driver's licenses)</td></tr>
</table>

<table>
<tr><td colspan="2">Widowed. If widowed, please complete the section below:</td></tr>
<tr><td>Spouse's Date of Death:</td><td>Spouse's name:</td></tr>
<tr><td colspan="2">Additional documentation you may be asked to submit: death certificate, W-2(s), tax return transcripts</td></tr>
</table>

Single/Never Married.

You may use the space below to provide additional information you believe is pertinent regarding your marital status:

By signing this form, I certify that all the information provided is complete and accurate.

_____   _____
Parent signature   Date

Electronic and typed signatures are not acceptable.

Please submit your form by mail or online at www.colorado.edu/financialaid/forms/secure-document-upload
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