

2019-2020  
Marital Status Form –  
Parent(s)



Student Financial Aid Office  
11400 Robinwood Drive  
Hagerstown, MD 21742

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**WARNING:** If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.

Student Name \_\_\_\_\_ HCC ID: \_\_\_\_\_

Student Address: \_\_\_\_\_ City, St.: \_\_\_\_\_

What is your parents (or parent/step-parent) marital status as of **today** (check **only one** and **fill out only one date below**)?

- Never Married                       Unmarried, both parents living together                       Separated  
 Married, or remarried                       Divorced, now single                       Widowed

Date your parents (or parent/step-parent) were **married/remarried**? \* \_\_\_\_\_

Date your parents (or parent/step-parent) were **separated**? \* \_\_\_\_\_

Date your parents (or parent/step-parent) were **divorced/widowed**? \* \_\_\_\_\_

**\* You may be required to provide documentation verifying the dates provided. \***

**Mother/Father/Step-Parent Information:** Full Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Street Address: \_\_\_\_\_ City, St: \_\_\_\_\_

Is this person Active Military Personnel?  YES  NO

If yes, where is this person stationed? \_\_\_\_\_

**Mother/Father/Step-Parent Information:** Full Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Street Address: \_\_\_\_\_ City, St: \_\_\_\_\_

Is this person Active Military Personnel?  YES  NO

If yes, where is this person stationed? \_\_\_\_\_

**IMPORTANT: If you would like to provide a statement to help explain the marital status circumstances, please feel free to do so.**

*Each person signing this form certifies that all the information reported on it is complete and correct.*

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date