

2020-2021
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**)?

- 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. ***

Parent/Step-Parent Information: Full Name: _____ Date of Birth: _____

Social Security Number: _____ - _____ - _____ Street Address: _____

Is this person Active Military Personnel? YES NO

If yes, where is this person stationed? _____

Parent/Step-Parent Information: Full Name: _____ Date of Birth: _____

Social Security Number: _____ - _____ - _____ Street Address: _____

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.

Parent Signature

Date