2020–2021 Verification of Parents’ Marital Status

Student Name: ___________________________ Loyola ID: ___________________________
(Please print) (Your 11-digit Loyola ID number begins 0000)

The 2020-2021 FAFSA has determined that your parent marital status may be conflicting with the tax filing status reported. Please answer the questions below to determine whether additional documentation is needed.

On the date you filed your initial 2020-2021 FAFSA, what was the marital status of the parent(s) listed on the FAFSA application:

☐ Married/Remarried as of _____/_____/______ (MM/DD/YYYY of current marriage)
☐ Divorced/Separated as of _____/_____/______ (MM/DD/YYYY of divorce or separation)
☐ Widowed as of _____/_____/______ (MM/DD/YYYY of spouse’s death)
☐ Unmarried and both biological parents living together
☐ Never married

What was your parent’s and parent’s spouse (if applicable) 2018 tax filing status?

<table>
<thead>
<tr>
<th>Parent</th>
<th>Parent’s Spouse (if applicable)</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ Single</td>
<td>☐ Single</td>
</tr>
<tr>
<td>☐ Head of Household</td>
<td>☐ Head of Household</td>
</tr>
<tr>
<td>☐ Married – Filing Jointly</td>
<td>☐ Married – Filing Jointly</td>
</tr>
<tr>
<td>☐ Married – Filing Separately</td>
<td>☐ Married – Filing Separately</td>
</tr>
<tr>
<td>☐ Qualifying widow(er)</td>
<td>☐ Qualifying widow(er)</td>
</tr>
</tbody>
</table>

Explanation of tax filing status: Submit a signed statement detailing why the marital status may be conflicting. Please note that if the tax filing status does not appear to be allowed by the IRS (e.g. you are married but filed as Head of Household or Single), you may be required to amend your taxes or provide a signed letter from your tax preparer. Additional documentation may be requested in order to verify either the marital status or tax filing status reported on the FAFSA or on this form.

Certification Statement:
All of the information provided by me or any other person on or with this form is accurate and complete to the best of my knowledge. If requested, we agree to give proof of the information we have provided on this form. Proof may include court documents, etc. Failure to provide the requested information will result in the loss of financial aid eligibility.

Parent 1 Signature* ___________________________ Date ___________________________

Parent 2 Signature* ___________________________ Date ___________________________

*Typed and digital signatures are not acceptable

Scan completed form and upload to https://forms.luc.edu/faounload

Financial Aid Office
1032 West Sheridan Road
Sullivan Center Room 190
Chicago, Illinois 60660
Phone: 773.508.7704

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