

Office of Financial Aid 1510 Lake Rd | Dyersburg, TN 38024 financialaid@dscc.edu

month

year

Fax: 731-286-3354 Phone: 731-286-3350

2025-2026 Statement of Marital Status Dependent Student

Stı	udent's Name:	Student ID:
1.	Student's Marital Status	
	My marital status is: (Please check one)	
	Single / Never Married	Married / Remarried
	Divorced / Separated	Widowed
	Month and year you were married, separated, divorced, or widowed	d/ month year
2.	Parent's Marital Status	
	your legal (biological and/or adoptive) parent(s) and your steppar guidelines below will outline which parent's information are living and legally married to each other, answer to the figure parents are living together and are not married, answer the questional of the figure parent is widowed or was never married, answer the questional figure parents are divorced or separated and don't live together, and provided more financial support during the past 12 months or during received support from a parent. If your parents are divorced but live together, you'll indicate their mand you'll answer the questions about both of them. If your parents are separated but live together, you'll indicate their mand you'll answer the questions about both of them. If you have a stepparent who is married to the legal parent whose in provide information about the stepparent as well.	mation is needed. he questions about both of them. questions about both of them. ns about that parent. Isswer the questions about the parent who g the most recent year that you actually arital status as "Unmarried and are living marital status as "Married or Remarried,"
	My parent's marital status is: (Please check one.)	
	Single / Never Married	Married / Remarried
	Divorced / Separated	Widowed
	——— Unmarried and Living Together	

Month and year they were married, separated, divorced, or widowed. ———

3. Student's Family Information

List the people in your family in the chart below.

Include:

- Yourself
- Your spouse, if you are married
- Your dependent children if the following are true:
 - o They live with you (or live apart because of college enrollment),
 - o They receive more than half of their support from you, and
 - o They will continue to receive more than half of their support from you during the 2025-2026 academic year.
- Other persons if the following are true:
 - o They live with you,
 - o They receive more than half of their support from you, and
 - o They will continue to receive more than half of their support from you during the 2025-2026 academic year.

If more space is needed, attach a separate page with your name and ID at the top.

Full Name	Age	Relationship to You
Marty Jones (example)	28	Self

Student's Signature:	Date:
Describe Characterist	Data
Parent's Signature:	Date:

When you have completed this form please return it along with all requested documents to the financial aid office. You can either mail (1510 Lake Rd., Dyersburg, TN 38024), fax (731-286-3354), or drop off at any of our 3 locations.

Dyersburg State Community College does not discriminate against students, employees, or applicants for admission or employment on the basis of race, color, religion, creed, national origin, sex, sexual orientation, gender identity/expression, disability, age, status as a protected veteran, genetic information, or any other legally protected class with respect to all employment, programs, and activities sponsored by Dyersburg State Community College. The staff that have been designated to handle inquiries regarding non-discrimination policies and the Dyersburg State Community College's policy on nondiscrimination can be found at https://www.dscc.edu/non-discrimination-policy/. A Tennessee Board of Regents Institution.