

Office of Financial Aid 1510 Lake Rd| Dyersburg, TN 38024 financialaid@dscc.edu Fax: 731-286-3354

Phone: 731-286-3350

## 2025-2026 Statement of Marital Status Independent Student

Student's Name:		St	Student ID:	
1. S	Student's Marital Status			
ľ	My marital status is:			
	Single / Never Married	Married/Remarried	Widowed	
	Divorced / Separated	Unmarried and Living To	ogether	
ſ	Month and year you were married, separa	ated, divorced, or widowed.	month / year	
<b>2.</b> S	Student's Family Information			
L	List the people in your family in the chart below.			
<u>lı</u>	<u>Include</u> :			
-	- Yourself			
-	Your spouse, if you are married			
-	Your dependent children if the following are tr	ue:		
	<ul> <li>They live with you (or live apart because o</li> </ul>			
	<ul> <li>They receive more than half of their support</li> </ul>	ort from you, and		
	<ul> <li>They will continue to receive more than ha</li> </ul>	alf of their support from you durir	ng the 2024-2025 academic year.	
-	- Other persons if the following are true:			
	<ul> <li>They live with you,</li> </ul>			
	<ul> <li>They receive more than half of their support</li> </ul>			
	<ul> <li>They will continue to receive more than had</li> </ul>	alf of their support from you durir	ng the 2024-2025 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	
		ı		
Stud	lent'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.

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