

**2026-2027 DEPENDENT PARENT INFORMATION**

Student Name \_\_\_\_\_ Student ID \_\_\_\_\_

**PLEASE ANSWER THE FOLLOWING QUESTIONS**

If your parents are divorced or separated, provide the information for the parent that you last lived with and their current spouse (if married).

1. What are your parents' marital status as of today? ☐ Married/Remarried ☐ Unmarried, but living together  
☐ Never married/ Single ☐ Divorced/ Separated ☐ Widowed

2. What is the month and year your parents were married, separated, divorced, or widowed? \_\_\_\_ / \_\_\_\_

**3. Parent One Information:**

Full Name \_\_\_\_\_

D.O.B (MM/DD/YYYY) \_\_\_\_\_ Social Security Number \_\_\_\_\_

**4. Parent Two Information:**

Full Name \_\_\_\_\_

D.O.B (MM/DD/YYYY) \_\_\_\_\_ Social Security Number \_\_\_\_\_

5. What is your parents' state of legal residence? \_\_\_\_\_

6. Did your parents become legal residents of the state before January 1, 2021? ☐ Yes ☐ No

If "No," give month and year legal residency began for the parent who has lived in the state the longest.

\_\_\_\_ / \_\_\_\_

**CERTIFICATION**

By signing this application, you agree, if asked, to provide information that will verify the accuracy of your completed FAFSA. This information may include your U.S. or state income tax forms.

In addition, you certify that you understand that the Secretary of Education has the authority to verify information reported on this application with the Internal Revenue Service and other federal agencies.

**WARNING: If you purposely give false or misleading information, you may be fined, sent to prison, or both.**

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

***\*SIGNATURES MUST BE HANDWRITTEN\****