

Parent Signature:___

Financial Aid Office 16000 E. CentreTech Parkway Aurora, CO 80011 FinancialAid@CCAurora.edu P: 303-360-4709 F: 303-361-7401

www.CCAurora.edu

TFPEVN

2023-2024 Parent Marital/Tax Filing Status

Student ID Number: S	
Student Name:	Phone Number:
conflicting information between your parents' Marital S	by the Department of Education for potentially containing status and their Tax Filing Status. You are required to resolve this ation can be processed. We may require additional information and their federal tax return.
Please verify the following information.	
1. As of the date the FAFSA was completed, what v	was your parent(s) marital status:
Never married Married or remarried (Date of marriage: Divorced or separated (Date of divorce or sep Widowed (Date widowed: 2. For the 2021 tax year, what was your parent(s) Single Head of household Married-filed joint return	paration:)
3. If your parent(s) marital status does not match t	their 2021 tax filing status, explain why:
providing false or misleading information could result in pursuant to U.S. Criminal Code and Colorado Criminal IMPORTANT: <i>Financial Aid can only pay for the classes or make an appointment with your advisor.</i>	required by your declared major. Please refer to your degree check
Student Signature:	Date:

Date:___