

Student's Name:	Student ID #:
Parent(s)/ Spouse Name:	
<u>Verify St</u>	udent and/or Parent's Marital Status
	our or your parents' Federal tax filing status for the calendar year of 2021. It parents' "marital status" did not match the "tax filing status" in accordance d, signed at the bottom, and returned to:
	Community College –Office of Financial Aid rive, Portsmouth NH 03801 or Fax to 603-334-6308
This form is required for: Student Parent	
1. According to the FAFSA your a □ Single □ Married/Remarried/Dom □ Never Married □ Divorced/Separated □ Widowed □ Unmarried and living tog	
2. The tax filing status listed is: ☐ Single ☐ Head of Household ☐ Married filing jointly ☐ Married filing separately ☐ Qualifying widower	7
•	ur parent is currently remarried, spousal information is required on the you qualified to file separate 2021 tax returns. **
Please document the reasoning for your	2021 tax filing status:
best of my/our knowledge. I (We) understa	res ted on this form and on any attachments is true, complete and accurate to the and that any false statements could be cause for denial, reduction, withdrawal or
repayment of financial aid. Student signature:	Date:

Date:

Parent signature: