

Center for Student Financial Planning and Services
99 Main Street
Franklin MA, 02038
P. 508-541-1518
F. 508-541-1941
sfp@dean.edu

2026-2027 STUDENT'S MARITAL STATUS CLARIFICATION

Student's Information			
Student Name	Student Date of Birth	Dean College ID #	
Phone Number		Student's Email Address	
Student's Marital Status The marital status you listed on the I should be as of the day the application Current marital status (please checkly)		marital status on the FAFSA	
☐ Married or remarried	Date of M	arriage:	
□ Separated	Date of Se	eparation:	
□ Divorced	Date of Da	ivorce:	
□ Widowed	Date Wide	owed:	
☐ Single/never married			
By signing this form, each person certifies that all WARNING: If you purposely give false or misleading inf	the information is correct and complete. Formation on this worksheet, you may be fined, be sentenced to jail,	or both.	
Student Signature:		Date:	
Spouse Signature (optional if applied	se Signature (optional if applicable): Date:		
	(electronic signatures are <u>not</u> acceptable)		