

Financial Aid Office Phone: (973) 655-7600 redhawkcentral@montclair.edu

Scan & Upload to StudentForms:

https://montclair.verifymyfafsa.com

## 2024-25 Parent Marital Status Statement

STUDENT INFORMATION				
PLEASE PRINT:				
Last Name	First Name	M.I.	CWID Number	
Address (include apartment number)				
City	State	Zip	Phone number (include area code)	
	PARENT MARITA	L STATUS S	STATEMENT	
Student – this information is:	for the <b>parent</b> you are l	iving with:		
Parent, are you currently man	ried?	[ ] YES	[ ] NO	
If yes, please indicate the foll	owing (please print):			
Name of current spouse				
Date of this marriage				
Parent signature			Date	

NOTE: Computer generated signature is not acceptable.