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# 2021-2022 Parent Marital Status Form

*\*Black Ink Only\**

PMAR02

The Parent Marital Status form is used to document loss of income due to divorce or death of parent, or to reconcile a discrepancy of information reported on the FAFSA regarding the parent's tax filing status and marital status.

\_\_\_\_\_  
 Student Name Student ID Phone Number (include area code)

Select the option that applies to your parent's current situation and submit this form with the required documentation.

**Married/Remarried**

Date of status: \_\_\_\_\_ (required)

**Required documentation:**

- 2019 tax return transcript(s) (requested from IRS) or signed 2019 tax returns for both parents

**Divorced/Widowed**

Date of status: \_\_\_\_\_ (required)

**Required documentation:**

- Divorced: copy of final divorce decree, and 2019 Wage and Income Statement (from IRS) for custodial parent or copies of all 2019 W2s for both parents
- Widowed: copy of death certificate, and 2019 Wage and Income Statement (from IRS) for custodial parent or copies of all 2019 W2s for both parents

**Separated**

Please initial one option below:

\_\_\_\_\_ **Required documentation:** Petition for divorce from courts, legal separation court document (if not married in TX.)

OR

\_\_\_\_\_ **I certify that I am separated from my spouse as of the following date** \_\_\_\_\_.

I maintain a separate household from my spouse, which includes independently paying more than 50% of my household's expenses. Household expenses include mortgage/rent, utilities, food, child care, and health care.

**Certification & Signature(s)**

**I certify the information on this appeal to be complete and accurate and that I have attached the required documentation. If any of the information changes, I understand I must promptly notify the Office of Financial Assistance and that the student listed on this form may be responsible for repayment of financial aid received if I fail to do so.**

\_\_\_\_\_  
 Parent name (printed - required)

\_\_\_\_\_  
 Parent signature (required)

\_\_\_\_\_  
 Date (required)