



LEE COUNTY CAMPUS
OFFICE OF FINANCIAL AID
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SERVING CHATHAM, LEE & HARNETT COUNTIES

VERIFICATION OF SEPARATION STATUS FOR THE TITLE IV PROGRAM (DEPENDENT STUDENT)

Student's Name: (Print your full name) Student ID#:

This section must be completed by your parent:

I, (Parent's full name), am separated from my

spouse, since

We are no longer residing together and plan to obtain a divorce.

My address is:

City: State Zip:

My spouse's address is:

City: State Zip:

PLEASE NOTE: You must submit a letter on letterhead from the following organization:

FOR MILITARY AND THEIR DEPENDENTS: A letter is required from the Family Services Office, Unit Chaplain, or the Unit S-1 Personnel Office.

FOR CIVILIANS: A letter is required from a clergyman, a lawyer, landlord or your employer. In the event that it is not possible to obtain written documentation from an individual previously listed, you may submit a notarized statement from an individual who is not your relative. However it must be noted how long this person has known you, and in what connection (failure to note this information in the letter will result in delay of your aid process). A copy of a legal document, i.e., Separation Agreement, or Divorce Decree, along with this notarized form is also acceptable.

I understand that my separation is subjected to investigation by the proper authorities. In addition, if I give false or misleading information, I may be subject to a \$20,000 fine, a prison sentence, or both.

Parent's Signature: (You must sign this form in the presence of a notary.)

County:

State:

NOTARY SEAL

My commission expires:

Sworn to and subscribed before me this, the day of, 20.

Notary Signature:

Please Print Notary Name: