STUDENT **FINANCIAL SERVICES**
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Seattle Pacific UNIVERSITY

2015 - 2016 MARITAL STATUS CHANGE APPEAL

STUDENT NAME: _____ SPU ID: _____

You have recently updated your 2015-16 FAFSA to indicate that you are now married or have notified our office that you will be getting married and would like to appeal your dependency status. Please submit the following appeal and documentation for review. Based on the circumstances of your appeal, the SFS Committee will decide your dependency status for the 2015-16 academic year.

Please submit the following information:

STUDENT INFORMATION
Attach a copy of your marriage license, tax transcripts and W-2s to this document.

- ☐ **I have attached a copy of my marriage license.**
- ☐ **I have attached a copy of my spouse's 2014 tax transcript and W-2s.**
- ☐ **I have provided an explanation of my recent changes, including the following:**
  1. **Where I am now living (e.g. still with parents, independent from parents, etc.).**
  2. **How much support my parents will provide for the 2015-16 academic year.**
  3. **How much support my spouse's parents will provide for the 2015-16 academic year.**
  4. **Any other circumstances that affirm my independency.**

_____

_____

By signing this verification statement, I attest that the information reported on this form is true and complete to the best of my knowledge.

_____
Student Signature Date Phone Email

In addition to the documents listed above, we also need a statement from your parents indicating either that they are no longer supporting you or how much they will be providing in support. If you are unable to obtain a statement from your parents please contact Student Financial Services.

PARENT STATEMENT
Please select <u>one</u> option below:

- ☐ **I am no longer supporting my student in any way financially (tuition, rent, food, miscellaneous costs)**
- ☐ **I am continuing to provide $_____ per month in support to my student. I intend to continue to assist them until (date)** _____

By signing this verification statement, I attest that the information reported on this form is true and complete to the best of my knowledge.

_____
Parent Signature Date Phone Email

Please note that if you have received a disbursement of Parent PLUS loan for this year, any subsequent quarter's disbursements will be cancelled if you are granted Independent student status. As an Independent student, you will no longer be eligible to receive the Parent PLUS loan.

OFFICE USE ONLY

Approved per Professional Judgment _____ Initials

☐ Yes ☐ No _____ Date