

401 S. State Street • Chicago, IL 60605 • TEL: 312-935-6260 • FAX: 312-935-6201 • EMAIL: financialaid@robertmorris.edu

The information requested on this form is needed to process your application for financial aid for 2019-2020. Complete this form and return it to the address above within 30 days. All submitted information must include the student's RMU ID number.

 Student's Name (Last, First, M.I.)

 RMU ID Number (required)

 Email Address

This form is to be completed by the student IF they filed their FAFSA as an Independent Student. If student is Dependent, the parent who signed the Free Application for Federal Student Aid (FAFSA) needs to complete this form. The marital status reported on the FAFSA is in conflict with the tax filing status also reported on the FAFSA. Please confirm your marital status below. *You may be asked to provide additional documentation*

SPOUSE'S NAME (IF INDEPENDENT AND IF APPLICABLE – PLEASE PRINT) _____

PARENT 1 NAME (IF DEPENDENT STUDENT - PLEASE PRINT) _____

PARENT 2 NAME (IF DEPENDENT STUDENT - PLEASE PRINT) _____

ADDRESS _____

Choose the box that best describes your marital status on the day the student's 2019-2020 FAFSA was completed and complete the necessary information below.

 Single/Never Married
 Married. If married, please complete the section below:

Marriage Date:

Spouse's Name:

Did you and your spouse live at the same address for the last 6 months of 2017:

 Yes No, Spouse's address as of July 1, 2017 _____

 Separated. If Separated, please complete the section below:

Separation Date:

Spouse's Name :

Spouse's Address:

Additional documentation you may be asked to submit: legal separation documents, W-2's, tax return transcripts, documentation that shows separate residences (mortgage statements, lease agreements, utility bills, copies of driver's licenses)

For Dependent Students Only: Unmarried and both parents living together. If unmarried and both living together, please complete the section below:

Other parent's name:

Is other parent the student's biological or adoptive parent? Yes No

Additional documentation you may be asked to submit: Tax return transcripts

Divorced. If divorced, please complete the section below:

Divorce Date:

Ex-spouse's Name :

Is your ex-spouse the student's biological or adoptive parent: Yes No

Ex-spouse's address as of the date of student's 2019-2020 FAFSA was originally completed (If Known)

Prior to the divorce being finalized, did you and your ex-spouse maintain separate residences?

Yes, Separation Date: No

Additional documentation you may be asked to submit: divorce decree, W-2's, tax return transcripts, documentation that shows separate residences (mortgage statements, utility bills, driver's licenses)

Widowed. If widowed, please complete the section below:

Spouse's Name:

Spouse's DOD :

Additional documentation you may be asked to submit: marriage and death certificates

Certification and Authorization

Do **NOT** submit without **ALL** required signatures.

I (we) certify that the information provided on this form is correct and complete. I (we) also agree to contact the RMU Office of Financial Aid if the information provided require changes.

STUDENT'S SIGNATURE

DATE

PARENT'S SIGNATURE

DATE

SPOUSE'S SIGNATURE (IF APPLICABLE)

DATE