Vance-Granville Community College
Office of Financial Aid

Main Campus, 200 Community College Rd
PO Box 917, Henderson, NC 27536
(252) 738-3280 (P) (252)738-3388 (F) fao@vgcc.edu

2026-2027 Marital Status Confirmation

Student's Name:_____ **VGCC Student ID#:**_____

Check the box for whom the marital status relates to:

☐ Student _____ ☐ Parent _____
Print Name *Print Name*

Indicate marital status:

☐ Married – Please provide the full date of marriage _____/_____/_____

☐ Widowed – Please provide the month and year of death _____/_____

☐ Divorced – Please provide the month and year the divorce was finalized_____/_____

☐ Separated – Please complete the following.

I,_____, am separated from my spouse,_____.
Print Name *Print Name*

We were separated on _____/_____ (month and year). We are no longer residing together at the same address.

My address is _____

My spouse's address is _____

Certification and Signatures:

Each person signing below certifies that all of the information reported is complete and correct. The student and one parent whose information was reported on the FAFSA must sign and date it. ***WARNING: If you purposely give false or misleading information, you may be fined, sent to prison, or both.***

_____ _____
Student's Signature (*Required*) **Date**

_____ _____
Parent's Signature (*Required, if Dependent Student*) **Date**