

## 2025-2026 Student Verification of Marital and/or Tax Filing Status

| Student Name:   | ECU (Banner ID:                        |  |   |
|---|--|--|---|
|   | ·                                      |  | entially containing conflicting information verify the accuracy of this data and <b>resolve</b> |
| Log on to <a href="https://studentaid.gov">https://studentaid.gov</a> and m   | nake the correction                    | s to your marital status and tax filin   | g status.   |
| If you feel that the FAFSA application is explanation if necessary, in the appropr  |  | The state of the s | omplete and return this form, including an ally one box in each column.                         |
| Please Note: Your 2025-2026 FAFSA w   | ill be updated, as ne                  | eeded, based on the information pro  | vided on this form.   |
| What is your Marital Status as of the date you completed the 2025-2026 FAFSA  |  | Please indicate your tax filing status as stated on your 2023 Federal Tax Return   |   |
| Single or Unmarried   |  | Single   | Will Not File   |
|   |  | Head of Household  |   |
| Married or Re-Married   | Re-Married Married Filing Joint Return |  |   |
| Date of Marriage:   |  | Married Filing Separate Return (You must report both your and your Spouse's income on the FAFSA)   |   |
| Name of Spouse:   |  | Both my and my spouse's  | s income is reported on the FAFSA.  |
| Spouse's Date of Birth:   |  | Both my and my spouse's income is not reported on the FAFSA.  Explanation:   |   |
|   |  |  |   |
| Divorced or Separated   |  | Single   |   |
| Date of Divorce or Separation: _  |  | Head of Household  |   |
| Widowed   |  | Single   |   |
| Date Widowed:   | <del></del>                            | Head of Household  |   |
|   |  | Qualifying Widower (By Checking this box you certify you are a qualifying widower and have provided only the surviving spouse's income on the FAFSA)   |   |
| I certify that all the information report<br>additional documentation. Purposely<br>the Inspector General for Student Aid | providing false or r                   | •  | nd that I may be required to provide ksheet, may result in an investigation by                  |
| Student Signature   | <br>Date                               | Spouse's Signature   | <br>Date  |

Due to Federal Privacy Regulations regarding email and the protection of your personal information, we urge you to send documents to our secure FAX at 252-328-4347 or mail all documents to Office of Student Financial Aid, MS510, East Carolina University, Greenville, NC 27858. If you have any questions, please contact our office at 252-328-6610.