



Lassen Community College
 Financial Aid Office
 P.O. Box 3000
 Susanville, CA 96130

2025-2026 Student -Marital Status Resolution

PRINT ALL INFORMATION NEATLY IN BLUE OR BLACK INK ONLY. DO NOT USE WHITEOUT.

SECTION A: STUDENT INFORMATION

Last Name	First Name	M.I.	Student ID	Date of Birth
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SECTION B: STUDENT MARITAL STATUS

What was your marital status as of the date you filed your original FAFSA for the 2025-2026 academic year?
 (Please check one)

- Married/Remarried – Date of Marriage: _____
- Separated – Date of Separation: _____
- Divorced – Date of Divorce: _____
- Widowed
- Single (Never Married)

What is your current Marital Status?
 (Please check one)

- Married/Remarried – Date of Marriage: _____
- Separated – Date of Separation: _____
- Divorced – Date of Divorce: _____
- Widowed
- Single (Never Married)

SECTION C: SIGNATURE CERTIFICATION

Each person signing below certifies that all of the information reported is complete and correct.

WARNING: If you purposely give false or misleading information, you may be fined, sent to prison, or both.

 Student's Signature

 Date