



2010 - 2011 Marital Separation Form

Third Party Verification

Financial Aid Office · UA Community College at

Morrilton

1537 University Blvd. · Morrilton, Arkansas 72110 · Fax: 501-977-2123

This form should be completed by a third party person who can verify that you are separated. This person should be familiar with your current marital situation and cannot be related to you.

Student Name \_\_\_\_\_ SSN/ID # \_\_\_\_\_

\_\_\_\_\_  
Name of Third Party Person

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
Address City State Zip Code

\_\_\_\_\_  
How do you know the student?

\_\_\_\_\_  
How long have you known the student?

Is the student currently separated?

Yes \_\_\_\_\_ No \_\_\_\_\_

What is the date of separation?

Month \_\_\_\_\_ Year \_\_\_\_\_

Describe what you know about the above student's current marital status, plans to file for divorce, and any other relevant information.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Certification Statement

I certify that the above information is true and correct to the best of my knowledge, and I understand that purposely providing false or misleading information on this form may result in a denial or repayment of financial aid for the student, in this and/or future years.

\_\_\_\_\_  
Signature of Third Party Date