

Academic Year: 2024-2025

Form: Independent Change in Marital Status

Student's Name: \_\_\_\_\_ Student's ID #: \_\_\_\_\_

**Please scan and submit your appeal documents at [www.umgc.edu/help/submit-case.cfm](http://www.umgc.edu/help/submit-case.cfm).**

If your family has experienced significant changes in income that occurred after the initial transaction of the FAFSA due to a change in your marital status (marriage, separation, divorce), please complete this form.

Before your appeal can be considered, your 2024-2025 Free Application for Federal Student Aid (FAFSA) must be completed and all required documents must be submitted. UMGC is held accountable for all decisions made and must be able to fully document why a decision was made to adjust a student's FAFSA. **If an appeal is incomplete, it will not be reviewed.**

Submission of an appeal **does not guarantee** approval of an appeal. Additionally, approval of an appeal does not guarantee receipt of additional aid. You are responsible for all outstanding charges with UMGC.

**Required Documents:** If a document listed below is not applicable to your situation, please submit a signed statement indicating why you do not have the document.

1. Completed appeal form – both pages
2. A typed statement that explains your circumstances in detail – must be signed by hand and dated
3. [2022 Tax Return Transcript](#) and all accompanying schedules or signed copy of 2022 IRS Form 1040 federal tax return and all accompanying schedules for student  
[2022 Tax Return Transcript](#) and all accompanying schedules or signed copy of 2022 IRS Form 1040 federal tax return and all accompanying schedules for spouse (if applicable)
4. [2022 Wage and Income Transcript](#) for student  
[2022 Wage and Income Transcript](#) for spouse (if applicable)
5. If you are currently married: copy of marriage certificate  
If you are currently divorced: copy of divorce decree  
If you are currently separated: copy of legal separation agreement, or a signed letter from a third party professional (attorney, clergy, counselor, etc.) on their official letterhead, stating date of separation

**Instructions:** Please continue to Page 2 to provide your current family size.

Please complete the chart below by listing all members of your family size. If additional space is needed, use an extra page.  
 The definition of family size includes:

- Yourself
- Your spouse, if you are married
- Your children -- even if they do not live with you -- if you will provide more than half of their financial support from July 1, 2024 to June 30, 2025, or if they would be required to provide parental information if they were completing their own FAFSA for 2024-2025.
- Other people who now live with you, if you provide more than half of their support and will continue to provide more than half of their support through June 30, 2025.

Full Name	Age	Relationship
		<i>Self</i>

**STATEMENT OF CERTIFICATION**

All of the information on this form is true and complete to the best of my knowledge. If requested, I agree to provide further documentation to substantiate the information provided. I understand that all special circumstances are reviewed on a case-by-case basis and this written request does not guarantee approval and/or may not ultimately result in an actual change to the financial aid already offered. All persons providing information must sign below.

Student's Signature \_\_\_\_\_ Date \_\_\_\_\_