

2023-2024



1510 Lake Road
Dyersburg, TN 38024
www.dsc.edu

USE
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ONLY

2023-2024 Verification of Parent Data

Student's Name _____

Student I.D. _____

Parental Information

Please complete the following section based on your parent's *current marital status*. "Parent" means your legal (biological and/or adoptive) parent or your stepparent. In addition, the guidelines below will outline which parent's information is needed.

- If your parents are living and legally married to each other, answer the questions about both of them.
- If your parents are living together and are not married, answer the questions about both of them.
- If your parent is widowed or was never married, answer the questions about that parent.
- If your parents are divorced or separated and don't live together, answer the questions about the parent with whom you lived more during the past 12 months. If you lived the same amount of time with each parent, give answers about the parent who provided more financial support during the past 12 months or during the most recent year that you actually received support from a parent.
- If your parents are divorced but live together, you'll indicate their marital status as "Unmarried and are living together" and you'll answer the questions about both of them.
- If your parents are separated but live together, you'll indicate their marital status as "Married or Remarried," and you'll answer the questions about both of them.
- If you have a stepparent who is married to the legal parent whose information you're reporting, you must provide information about the stepparent as well.

What is the current marital status of your parent? (Please circle one)

Married/Remarried Divorced/Separated Never Married Widowed Unmarried and are living together

What is the date of the current marital status of your parent? _____

What state is your parent a legal resident of? _____

What date did they become legal residence of this state? _____

Parent Data:

Last Name: _____

First Initial: _____

Social Security Number: _____

Date of Birth: _____

Parent's Spouse's Data:

Last Name: _____

First Initial: _____

Social Security Number: _____

Date of Birth: _____

Student's Signature

Date

Parent's Signature

Date

When you have completed this form, please return it along with all requested documents to the financial aid office. You can either mail, (1510 Lake Rd., Dyersburg, TN 38024) fax (731-286-3354) or drop off at any of our 3 locations.

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