

Office of Financial Aid 1510 Lake Rd | Dyersburg, TN 38024 financialaid@dscc.edu

Fax: 731-286-3354 Phone: 731-286-3350

2025-2026 Verification of Spouse's Data

Student's Name:	ame: Student ID:					
1. Student's Spous	se's Information married your spouse?					
	s tax filing status for the 2023					
Married filed Jointly	Married filed Separately	Head of Household	Single	Not going to file		
Spouse's Data:						
Last Name:						
First Initial:						
Social Security N	umber:					
Date of Birth:						

2. Student's Family Information:

List the people in your family in the chart below.

<u>Include:</u>

- Yourself
- Your spouse, if you are married
- Your dependent children if the following are true:
 - They live with you (or live apart because of college enrollment),
 - o They receive more than half of their support from you, and
 - They will continue to receive more than half of their support from you during the 2024-2025 academic year.
- Other persons if the following are true:
 - o They live with you,
 - o They receive more than half of their support from you, and
 - o They will continue to receive more than half of their support from you during the 2024-2025 academic year.

If more space is needed, provide a separate page with the student's name and ID number at the top.

Full Name	Age	Relationship to You	Will they be enrolled in at least 6 hours in college?	
Marty Jones (example)	18	self	Yes No	
			Yes No	

Student's Signature:	Date:	
Spouse'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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