



Office of Financial Aid
1510 Lake Rd | Dyersburg, TN 38024
financialaid@dscctech.edu
Fax: 731-286-3354
Phone: 731-286-3350

2026-2027 Verification of Spouse's Data

Student's Name: _____ Student ID: _____

1. Student's Spouse's Information

What is the date you married your spouse? _____

What is your spouse's tax filing status for the 2024 year? (Circle One)

Married filed Jointly Married filed Separately Head of Household Single Not going to file

Spouse's Data:

Last Name: _____

First Initial: _____

Social Security Number: _____

Date of Birth: _____

2. Student's Family Information:

List the people in your family in the chart below.

Include:

- Yourself
- Your spouse, if you are married
- Your dependent children if the following are true:
 - o They live with you (or live apart because of college enrollment),
 - 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 2026-2027 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 2026-2027 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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