

2021-22 Marital Status Change Request Form

Office of Student Financial Assistance - One University Ave - Bourbonnais, IL 60914
Phone: (815) 939-5245 Fax: (815) 939-5074 Email: studentfinance@olivet.edu

Federal Student Aid Regulations provide the potential for reevaluation if your financial circumstances change drastically from the information you provided on the 2021-2022 Free Application for Federal Student Aid (FAFSA). When appropriate and sufficient documentation is provided, it may be possible to take these circumstances into account by making adjustments to your FAFSA. Once you have completed all steps below, return this form along with the required supporting documentation to the Olivet Nazarene University Office of Student Financial Assistance. Each case will be evaluated on an individual basis.

STEP I: Student Information

First Name	M.I.	Last Name	ONU ID#
Mailing Address			
City	State	ZIP	Phone # ()
Date of Marriage	Month	Day	Year
			Social Security #

STEP II: Spouse Information

First Name	M.I.	Last Name	Social Security #
Mailing Address			
City	State	ZIP	Phone # ()

STEP III: Required Documentation – all documents listed below must be submitted with this form

1. Marriage License – Please bring in or mail an original copy with the court seal. If mailed, we will return the original to you.
2. A SIGNED copy of the Student and Spouse 2019 IRS Tax Return(s) **OR** a copy of the Student and Spouse 2019 IRS Tax Return Transcript(s) (2019 IRS Tax Return Transcripts can be requested for free online at www.irs.gov/Individuals/Get-Transcript when prompted, choose “Return Transcript” and “2019”, or you may call **1-800-908-9946** to request a copy to be mailed to you – when prompted, choose option “2” and enter “2019” for the tax year.)
3. A copy of the Student and Spouse 2019 W-2 form(s)
4. Standard Verification Form for Independent Students.
5. Other verification documents that may be requested by the Office of Student Financial Assistance.

STEP IV: Sign, Date, and Return to the Olivet Nazarene University Office of Student Financial Assistance

I certify that ALL of the information on this form is complete and correct:

Student Signature (Required) Date

Spouse Signature (Required) Date

(Computer-generated/typed signatures will NOT be accepted.)

WARNING: If you purposely give false or misleading information on this form, you may be fined, sentenced to jail, or both. If we have reason to believe that the information on this form is not accurate, we may require additional documentation.