

Troy University
Proof of Separation Form
2024-2025
Call 1-800-414-5756 for questions



STUDENT: _____ **Student ID Number:** _____
(First, Middle, Last Name)

Your FAFSA indicated that you and your spouse are separated. This form is required to verify your marital status. You must attach all required supporting documents to this form and submit as a complete package. Our office must determine if you are physically and financially separated from your spouse.

STEP ONE:

Complete the following information about your spouse:

1. Print the name of your spouse below:

SPOUSE'S NAME: _____

2. Complete the following information on your **spouse**.

Spouse's current residential address: _____

Date of Marriage: _____(MM/DD/YY) Date of Separation: _____(MM/DD/YY)

STEP TWO:

Complete the following information **about yourself**:

1. Benefits Received since the Separation: (example: Child Support or TANF?) Yes _____ No _____

If Yes, how much per month? _____ Beginning date: _____

Source: _____

2. What are the *monthly* rent /mortgage and utilities amounts? Rent/Mortgage _____ Utilities _____

Who pays for this? _____

If you receive public assistance or monetary assistance from family members, provide the amounts and proof.

Student's Name:

Student ID Number:

STEP THREE:

- 1. Provide copies of documents which are in your and your spouses name only such as utility bills, lease/rental/mortgage documents, and bank statements. Documentation must show that two separate households are being maintained by providing two different physical addresses. (P.O. Box is not acceptable).
- 2. Additional documentation may be requested by the Financial Aid Office to help us determine if you are physically and financially separated from your spouse. Examples: Military Records, Personnel Records from HR, letter from clergy, attorney, or marriage counselor.
- 3. Your documents will be reviewed faster if they arrive as a group rather than one at a time – all documents should have your name and ID included. **Attach all supporting documents to this form and submit together to the address below:**

Troy University
 Financial Aid Office
 134 Adams Admin. Bldg.
 Troy, AL 36082

By signing this form, I agree, if asked, to provide documentation that will verify the accuracy of all information provided. I further certify that all of the information provided is true and complete to the best of my knowledge, and realize that if I do not give proof when asked, aid may be denied. I also acknowledge that if I purposely give false or misleading information, I may be reported to the Inspector General, fined \$20,000 or sent to prison.

STUDENT'S SIGNATURE

DATE