HOLMES COMMUNITY COLLEGE

## Financial Aid Office 2016/2017

FORM - 17PMS

## **Clarification of Parent Marital Status of Responsible Parent**

Student's Name	Holmes ID Number
	16/2017 application for financial aid because it contains incomplete ion about whom your responsible parent is and that parent's current
the parent with whom you lived the most with signed. If you did not live with either parent, zero days), your responsible parent is the pare	your responsible parent are as follows: Your responsible parent is during the 12 months before your financial aid application was or it you lived with each parent an equal number of days (including ent who provided you the most support in the most recent 12-month ood, clothing, car, money, medical and dental care, payment of
Please complete the following clarification of According to the above definitions my response My Mother	
My Father	Father's Name:
The marital status of the responsible parent is:	
Married Married Remarried Divorced Separated* Widowed	(Month and Year)  Date of Marriage Date of Remarriage Date of Divorce (attach decree) Date of Separation Date Spouse Deceased
*Separation is defined as legally separated or for an indefinite period and the marriage is sev	informally separated when one of the partners has left the household vered.
	f Parent Marital Status of Responsible Parent Form is true and erstand that if I purposely give false or misleading information on this or removed from school.
Student's Signature No electronic signature, must be original	Date
Responsible Parent's Signature No electronic signature, must be original	Date

Return this form and all requested documentation by one of the following means: take to your campus Financial Aid Office, mail to Financial Aid Office, P O Box 216, Goodman, MS 39079, fax to 662-472-9170 or email to <a href="mailto:finaid@holmescc.edu">finaid@holmescc.edu</a>.