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# • CAYUGA COMMUNITY COLLEGE

Financial Aid Office • 197 Franklin Street, Auburn NY 13021 • FAX 315-252-2185

Auburn - 315-255-1743 ext. 2470 • Fulton 315-592-4143 ext. 3004

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## Separated

Student Name \_\_\_\_\_ Social Security # \_\_\_\_\_

Banner ID Number C \_\_\_\_\_

You indicated on your financial aid application that you (or your parents) are separated. In order to continue processing your financial aid application, we need some additional information. Please complete this form and return to the Financial Aid Office as soon as possible. Additional documentation may be requested to verify information.

### Dependent Students

Name of Custodial Parent \_\_\_\_\_

*(the parent whose income was reported on the FAFSA)*

Address of Custodial Parent \_\_\_\_\_

Name of *Non custodial* Parent \_\_\_\_\_

Address of *Non custodial* Parent \_\_\_\_\_

Date of Separation \_\_\_\_\_

Was a joint income tax return filed for 2011?                      **Yes**                      **No**  
(If "yes", please attach a copy of a signed 2011 tax return and 2011 W-2's for the parent whose income was reported on the FAFSA).

### Independent Students

Name of spouse \_\_\_\_\_

Address of spouse \_\_\_\_\_

Was a joint income tax return filed for 2011?                      **Yes**                      **No**  
(If "yes", please attach a copy of your signed 2011 tax return and your 2011 W-2's).

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

**Return to: Financial Aid Office at Cayuga Community College**