

100 Arend & Nancy Lubbers Student Services Center One Campus Dr., Allendale, MI 49401 Phone: 616.331.3234 • Fax: 616.331.3180

2019-2020 Student Marriage Worksheet

				their new marital status. Please allow 1-2	
Student Name:			Student ID Number: G		
Step I: You must attach the f	ollowing r	equired d	locume	nts	
 A copy of your 2017 Federal A copy of your spouse's 2013 For instructions to reque A copy of your marriage licer 	7 Federal Ta est this, pleas	x Return Tr		du/financialaid/verification	
Step 2: Household Informatio	n				
their support, and other people if the continue to provide more than half o	ey now live voor their support	with you and ort from July	d you prov y 1, 2018	and your children if you provide more than half of wide more than half of their support and will through June 30, 2019. Also, write in the name student, at least half-time, between July 1, 2019	
Full Name	Age	Relations	ship	College	
		Self		GVSU	
Step 3: Income Information					
below your employer(s) and any in □ I (the student) do not receive a W-	not required come received -2 or other	d to file, a 20 ved in 2017. earnings stat	tement.	Income Tax Return. If you checked this box, list	
Sources of Income/Name of	ources of Income/Name of Employer		Amour	nt Earned in 2017	
your spouse's employer(s) and any ☐ My spouse does not receive a W-2	required to f income reco 2 or other ea	file, a 2017 L eived in 201 arnings state	7. ement.	ne Tax Return. If you checked this box, list below	
Sources of Income/Name of Employer			Amour	nt Earned in 2017	

Page 1 of 2 MGCRT

Step 4: Asset Information

	Student & Spouse
As of today, what is your total current balance of cash, savings, and checking accounts?	\$
As of today, what is the net worth of your investments, including real estate? DO NOT include the home in which your parents live. Net worth means current value minus debt.	\$
As of today, what is the net worth of your current businesses and/or investment farms? DO NOT include a family farm or family business with 100 or fewer full-time or full-time equivalent employees.	\$

By signing this worksheet, I certify that all of the information reported to qualify for federal student aid is complete and correct. I further understand that purposely giving false or misleading information may result in a fine, jail terms, or both.

Student Signature:	Date:
Spouse Signature:	Date:

Please return your completed form to the Office of Financial Aid & Scholarships by fax, U.S. mail, or in person. Be sure to include your name and G Number on all pages. Missing information may delay processing.

Page 2 of 2 MGCRT