

Office of Financial Aid and Scholarships SFA Box 13052

Nacogdoches, TX 75962-3052 Phone: (936) 468-2403

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2025-2026 Proof of Parental Separation Form

Student Name		Student ID		
Contact Number				
form in order for our office			at not divorced. Please complete this paration as both physical and financial.	
PARENT INFORMATION:				
Must provide proof of	f separate residences of both par	ents, i.e. copies of separate utilit	y bills.	
 Print the name and so Federal Student Aid (F 		nt whose information you used t	o complete your Free Application for	
Parent Name:				
SSN:		Date of Birth		
Current Residential Addres	ss			
	(PO Box is NOT an acceptable address)			
	City	State	Zip	
Date of Marriage:		Date of Separation:		
	owing information about the <i>cur</i>			
Spouse's Full Name:				
SSN:		Date of Birth		
	ial Address			
	(PO Box is NOT an	(PO Box is NOT an acceptable address)		
	City	State	Zip	
PARENT SIGNATURE (Notary Required)		By signing this form, you are agreeing that all information on this form is true and correct to the best of your ability. If you purposely give false or misleading information on this		
Signature of Parent			ned, sentenced to jail, or both.	
State of Texas				
County of				
Before me		, on this day personally app	eared	
known to me or proved to	me through(description of ID.		to be the person whose name is	
			ne best of their knowledge and belief.	
	seal of office this day			
·	,			
Notary Public's Signature		(Notary's Personalize	ed Seal)	