University of Central Missouri Student Financial Services P.O. Box 800 Warrensburg, MO

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UCM use only

| Phone 660-543-8266 FAX 660-543-8080 Webpage: www.ucmo.edu/sfs 'RFXPHQWV 2QO\ (PDLO ILQDQFLDODVVLVWDQFH#XFPR HGX MA | RPJ |
|---|---------------|
| Student's Name (please print) 700 UCM ID Number | |
| I have married since my 20 /20 Free Applicatiform Federal Student Aid (FAFSA) vas | |
| submitted, and I Dm requesting my eligibility for federal financial aid be recalculated. Iam submittingcopies of the following documents the this request: | |
| My legal marriage certificate (date of marriagenust be prior to October 120). | |
| My 20 IRS Tax ReturnTranscript. | |
| My spouæ's 20 IRS Tax ReturiTranscript. | |
| FAILURE TO PROVIDE ALL INFORMATION AN DREQUIRED DOCUMENTS WILL DELAY THE RECALCULATION OF YOUR F INANCIAL AID. | |
| Spouse's Full Name: | |
| My spousewillwill not attend a college or universitying the 20 /20 school years she will attend, please provide the namether school: | ⊌ t or |
| Doyou \RXU VSRXVH handeyoodniil olwan? If so, how manyof your \RXU | |