

2016-2017 Non-Filer Income Verification – Parent

USE BLACK OR DARK INK ONLY

Student Name: _____ **Student ID #** _____
 (Print or type) Last name First name

NON-FILING STATEMENT

PARENT: Select the one that applies to your situation:

I will not file and certify that I am not required to file a 2015 federal income tax return and did not work in 2015. Sign at bottom of page.

I will not file and certify that I am not required to file a 2015 federal income tax return, but did work in 2015. **Attach all 2015 W-2s AND 1099s and sign at the bottom of the page.**

List each employer and the amount of income earned during 2015, including unemployment income. Be sure to list sources of income earned from work as reported on the FAFSA and the amount of income from each source for 2015 that is not reported on an IRS Form W-2. If additional space is needed, please attach a sheet listing each additional employer and amount earned.

EMPLOYER NAME	Amount earned	W-2/1099 Attached?	
	\$	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	\$	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	\$	<input type="checkbox"/> Yes	<input type="checkbox"/> No

SPOUSE: If you are married, your spouse should complete this section if he/she did not file a 2015 federal income tax return.

****If your spouse did file, his/her tax return transcript must be submitted to the financial aid office.**

I (spouse) will not file and certify that I am not required to file a 2015 federal income tax return and did not work in 2015. Sign at bottom of page.

I (spouse) will not file and certify that I am not required to file a 2015 federal income tax return, but did work in 2015. **Attach all 2015 W-2s AND 1099s and sign at the bottom of the page.**

List each employer and the amount of income earned during 2015, including unemployment income. Be sure to list sources of income earned from work as reported on the FAFSA and the amount of income from each source for 2015 that is not reported on an IRS Form W-2. If additional space is needed, please attach a sheet listing each additional employer and amount earned.

EMPLOYER NAME	Amount earned	W-2/1099 Attached?	
	\$	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	\$	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	\$	<input type="checkbox"/> Yes	<input type="checkbox"/> No

I (spouse) did file a 2015 federal income tax return and have attached my 2015 federal tax return transcript to this document. Sign at bottom of page.

Required Signatures: Your signature indicates that all information provided on this form is complete and correct. Additional information may be requested if further clarification is necessary, or to resolve conflicting information. By signing this document, I certify that the information reported is complete and correct. If I purposely give false or misleading information, I may be fined, sentenced to jail, or both.

 Student Signature

 Phone Number

 Date

 Parent Signature

 Date