

**- STUDENT/SPOUSE -
Non-Filers Income Verification**

STUDENT ID	STUDENT LAST NAME	STUDENT FIRST NAME	PHONE NUMBER (with area code)
PLEASE PRINT IN BLACK INK			

In order for us to continue processing your student's 2015-2016 financial aid application, we need to verify you and your spouse's, if married, 2014 income and wages. Even though you may not be REQUIRED to file a tax return, you must complete the information below. Report **ANY** wages you had from employment and **ATTACH** photocopies of any **W-2/1099** wage statements.

NOTE: If you do not have copies of your 2014 W2/1099's, you can obtain a **Wage and Income Transcript** from the IRS to submit to our office. Transcripts must be requested by the non-filer directly from the IRS online at www.irs.gov or by calling 1-800-908-9946. If you DO NOT have a valid SSN, but you have an ITIN, you will need to request your W2 & 1099 Transcript using IRS Form 4506T available at www.irs.gov

DO NOT LEAVE ANY ITEMS BLANK. ENTER ZERO ("0") OR "N/A" IF YOU DID NOT HAVE AN AMOUNT FOR 2014

STUDENT INFORMATION - Sources of Support for 2014

BENEFITS	SOURCES OF SUPPORT	2014 Amount	OTHER UNTAXED INCOME	2014 Amount	
<input type="checkbox"/> TANF <input type="checkbox"/> SNAP <input type="checkbox"/> SSB <input type="checkbox"/> SSI <input type="checkbox"/> WIC	<input type="checkbox"/> Disability <input type="checkbox"/> Worker's Comp	\$	Indicate if you received the following: 1. Payments to tax-deferred pension & retirement savings (e.g. Box 12 of W2's) 2. Child Support Received 3. Veteran's Non-Education Benefits 4. Housing, food, and other living allowances paid to members of military, clergy and others 5. Other untaxed income	1.	\$
	<input type="checkbox"/> Unemployment	\$		2.	\$
	<input type="checkbox"/> Other:	\$		3.	\$
<input type="checkbox"/> Employer:	\$	4.		\$	
<input type="checkbox"/> Employer:	\$	5.		\$	

I was not employed and had no income earned from work in 2014. (You MUST explain about your living expenses below)

SPOUSE INFORMATION - Sources of Support for 2014 (if married)

BENEFITS	SOURCES OF SUPPORT	2014 Amount	OTHER UNTAXED INCOME	2014 Amount	
<input type="checkbox"/> TANF <input type="checkbox"/> SNAP <input type="checkbox"/> SSB <input type="checkbox"/> SSI <input type="checkbox"/> WIC	<input type="checkbox"/> Disability <input type="checkbox"/> Worker's Comp	\$	Indicate if you received the following: 1. Payments to tax-deferred pension & retirement savings (e.g. Box 12 of W2's) 2. Child Support Received 3. Veteran's Non-Education Benefits 4. Housing, food, and other living allowances paid to members of military, clergy and others 5. Other untaxed income	1.	\$
	<input type="checkbox"/> Unemployment	\$		2.	\$
	<input type="checkbox"/> Other:	\$		3.	\$
<input type="checkbox"/> Employer:	\$	4.		\$	
<input type="checkbox"/> Employer:	\$	5.		\$	

I was not employed and had no income earned from work in 2014. (You MUST explain about your living expenses below)

If you have unusually LOW or NO income reported above, please explain how the living expenses were paid in 2014:

CERTIFICATION & SIGNATURE(S)

By signing this worksheet, I (we) certify that all the information reported on it is complete and correct and I (we) will not file, nor are required to file a 2014 Federal Income Tax Return.

Student Signature _____

Spouse Signature (if married) _____

Date _____

WARNING: If you purposely give false or misleading information you may be fined, be sentenced to jail, or both.