VERIFICATION OF NON-TAX FILER STATUS (2016 TAX YEAR)
(For Financial Aid for the 2018-2019 Year)

1. I (we, if married) affirm that I (we) have not filed a 2016 (United States) Federal Income Tax Return and am not required to file a 2016 (United States) Federal Income Tax Return.

2. List the income and benefits received during 2016. **Attach any supporting documentation to this form**. Do not include any financial aid. Include untaxed and taxed wages, child support, welfare benefits, worker's compensation, disability compensation, veteran's non-educational benefits, housing, food and other living allowances for military, clergy, etc.

       Social Security benefits   Amount: $ _____
       Child Support   Amount: $ _____
       Other (taxed or untaxed wages, welfare, worker's compensation, disability, etc.):
       _____   Amount: $ _____
       _____   Amount: $ _____
       _____   Amount: $ _____

Note to those who live and/or work outside the United States:

Please provide a copy of any wage documents. This includes any foreign tax returns, if applicable (with English translations). If there is no wage document or foreign tax return available, the parents' employers should provide a statement stating the annual income. This should be certified or notarized. Bank accounts from the last 3 months should also be provided.

3. If the total income above (taxed and untaxed) is less than what is typically thought to be necessary to meet basic household expenses, explain the circumstances that enabled you (and spouse/ children) to meet living expenses in 2016. You can note financial aid in this area.

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4. I (we) certify that all of the above information is true, complete and accurate to the best of my (our) knowledge. I (we) further understand that any false statements or misrepresentations will be cause for denial, reduction, withdrawal, and/or repayment of financial aid.

Student Signature	Date	Parent 1 Signature Date
Student's Name-Print		Parent 1 Name-Print
PeopleSoft # or last 4 digits of SSN		Parent 2 Signature Date
		Parent 2 Name- Print