

Non Tax Filing Form

Name: _____ ID#: _____

Student Phone # _____ Parent Phone # (if dependent student) _____

Address: _____ City: _____ State: _____ Zip: _____

Your FAFSA has been selected for a process called “verification.” In this process, we are required by the law to compare the information from your FAFSA with the information provided on this form. Complete all questions and submit the completed form to the Financial Aid Office.

Note: Aid cannot be disbursed until all requested documentation is received and reviewed. Please check your Argo Express to see missing requirements.

What we need from you:

Dependent Students	Independent Students
This completed form for each non-filer including parents (if applicable)	This completed form for you and your spouse (if applicable)
If parents did not file, they must obtain an IRS non-filing letter at https://www.irs.gov/individuals/get-transcript or by sending IRS form 4506-T to the IRS	If you and/or your spouse (if applicable) did not file, an IRS tax filing letter must be obtained at https://www.irs.gov/individuals/get-transcript or by sending IRS form 4506-T to the IRS

I _____ (Name of Non-tax filer) have not filed and will not file a Federal Tax return for the year _____. I have listed below **all of the resources** that were used to support myself/ourselves and our family.

This support for the Non-Tax filer came from:

Wages of Non Tax Filer (list each employer separately, and provide copies of W-2's)	\$ _____
Wages Received without W-2's (list each employer separately)	\$ _____
Social Security Benefits	\$ _____
Aid of Dependent Children (AFDC)	\$ _____
Temporary Assistance for Needy Families (TANF)	\$ _____
Veterans Non-Educational Benefits (Death, Pensions, DIC)	\$ _____
Worker's Compensation	\$ _____
SRS/Disability payments	\$ _____
Child Support (List children's names)	\$ _____
JPTA (salary for on the job training, not educational benefits)	\$ _____
Free living arrangements/Free Rent	\$ _____
Housing allowances (Military or Clergy)	\$ _____
Food allowances (Military or Clergy)	\$ _____
Gifts and cash support from relatives	\$ _____
Interest on tax-free stocks and bonds	\$ _____
Foreign Income Exclusions	\$ _____
Other _____	\$ _____

Signature:

By signing this form, you certify that the information provided is true and complete.

_____ Student Signature	_____ Date	_____ Parent Signature (if applicable)	_____ Date
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Please allow up to 10 business days for processing once all forms, including tax forms, have been submitted. Check your email for additional information.