



Student's Name: \_\_\_\_\_ Student CBFInAid ID: \_\_\_\_\_

### 202 -2 IDOC Non-Tax Filer's Statement

Each family member who did not submit and is not required to file a 20 tax return must print, complete, sign, and upload (or mail) this form. Parents may file one combined form if both parents did not file a 20 tax return.

Please print the name and SSN for the person(s) covered by this form.

Spouse's Name: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Parent's Name: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Parent's Name: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Non-Tax filer(s):  Student  Spouse  Mother  Father  Both Parents

List below all of the sources and amounts of money received from January 1, 20 through December 31, 20 . Include all untaxed income (e.g., AFDC, SSI, military living allowance) and earnings. Please submit supporting documentation for all income sources listed below such as copies of any W-2 form(s), 1099 form(s), or statements from your employer. Enter amounts in original currency.

20 Income Information: 1/01/ – 12/31/

| Source of Income | Amount |
|------------------|--------|
|                  |        |
|                  |        |
|                  |        |
|                  |        |
|                  |        |
|                  |        |
|                  |        |
|                  |        |
|                  |        |

Currency:  U.S. Dollar  Other: \_\_\_\_\_ Total: \_\_\_\_\_

,I \RXU FRXQWU\ V WD[ \HDU GRHV QRW IROORZ WKH FDOHQGDU \HDU \RX VKRX  
 \RXU FRXQWU\ V ODVW WD[ \HDU WKDW HQGHG RU ZLOO HQG EHIRUH \$\$SULO

**Certification**

By signing this form, I/we certify that I/we did not and am not required to file a 20 federal tax return. In addition, I/we certify that all of the information reported on this form is complete and correct. If form is being submitted for both parents, both parents must sign below.

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Spouse's Signature: \_\_\_\_\_ Date: \_\_\_\_\_ (if spouse non-tax filer)

Parent's Signature: \_\_\_\_\_ Date: \_\_\_\_\_ (if parent non-tax filer)

Parent's Signature: \_\_\_\_\_ Date: \_\_\_\_\_ (if parent non-tax filer)