



# NON-FILERS STATEMENT

**NFS  
2010-2011**

\_\_\_\_\_  
Student Applicant's Last Name

\_\_\_\_\_  
First Name

\_\_\_\_\_  
Middle Initial

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
Birthdate

\_\_\_\_\_  
E-mail Address

\_\_\_\_\_  
Telephone #

\_\_\_\_\_  
Cell Phone #

Complete this form if you are not required to and will not file a federal tax form (1040, 1040A, or 1040EZ). For IRS filing requirement details visit <http://www.irs.gov>. If you are married, you will want to include the income of your spouse; if you are separated or divorced, only report your income.

**DO NOT LEAVE ANY LINE BLANK. USE ZEROS IF YOUR ARE REPORTING NO INCOME.**

1. \_\_\_\_\_ I did not work
2. \_\_\_\_\_ I did not earn enough to be required to file. List sources and amounts of income below:

2009 Work Income	Total Dollar Amount for 2009	
	Student	Spouse
Employer:	\$	\$
Employer:	\$	\$
Employer:	\$	\$

I received other income or resources. List income below:

2009 Other Income or Resources	Student	Spouse
Dividend and interest income from checking, savings, trust fund & other accts (from 1099's)	\$	\$
Unemployment Benefits	\$	\$
Welfare Benefits including TANF. Don't include food stamps	\$	\$
Social Security benefits that were not taxed (such as SSI)	\$	\$
Payments to tax-deferred pensions & saving plan (pd directly or withheld from earnings), including from the W-2 Form in Box 12a, codes D,E,F,G, H, and S	\$	\$
Child support received for all children. Don't include foster care or adoption payments.	\$	\$
Housing, food & other living allowances paid to members of the military, clergy, and others (including cash payments and cash value of benefits)	\$	\$
Veterans non-educational benefits such as Disability, Death Pension, DIC and/or VA Educational Work-Study allowances.	\$	\$
Alimony	\$	\$

3. \_\_\_\_\_ If other, list source:
- |         | Student | Spouse |
|---------|---------|--------|
| Source: | \$      | \$     |
| Source: | \$      | \$     |

*By signing this form, I affirm that all information on this form and any attachments are complete and accurate to the best of my knowledge. If requested, I agree to provide documentation to support the information I have provided on this form. I understand that any false statements or misrepresentation may be cause for denial, reduction, withdrawal, and/or repayment of financial aid, and I may be subject to a fine, imprisonment, or both, under provisions of the United States Criminal Code.*

\_\_\_\_\_  
Student Name (Print clearly)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Student Signature