

2016-2017 FAFSA Verification

Parent of Dependent Student - Non-Tax Filer

Student Name: _____ **Student NU ID:** _____

We have received your student's 2016-17 Free Application for Federal Student Aid (FAFSA). Your student's FAFSA was selected for review in a process called "Verification." As part of this process, UNK is required by federal regulation to collect information to verify that the FAFSA is accurate. If any differences are found, we will make corrections electronically on your behalf and you will receive an updated Student Aid Report (SAR).

Please complete the instructions on this form and return it to the UNK Office of Financial Aid as soon as possible. **Be sure to include your student's name and NU ID on all forms submitted to our office.**

Parent Income and Tax Information:

Parent Income and Tax Information applies to married, unmarried, biological, adoptive and step-parents.

You indicated on your student's 2016-17 FAFSA that you will not file and are not required to file a 2015 income tax return with the IRS (form 1040, 1040A or 1040 EZ).

Please check the box that applies:

- You were not employed and had no income earned from work in 2015.
- You were employed in 2015 and have listed below the names of all employers, the amount earned from each employer in 2015, and whether you received an IRS W-2 form. **Attach copies of all W-2 forms issued to you by employers.** List every employer even if the employer did not issue an IRS W-2 form.

Parent 1 Information			Parent 2 Information (if applicable)		
Employer	2015 Amount Earned	Did you receive a W-2?*	Employer	2015 Amount Earned	Did you receive a W-2?*
	\$	Yes / No		\$	Yes / No
	\$	Yes / No		\$	Yes / No
	\$	Yes / No		\$	Yes / No
	\$	Yes / No		\$	Yes / No

Please list additional sources of income/employers on the back of this form.

***If you marked "Yes," to any of the W-2 questions above, please attach a copy of the W-2(s) when you submit this form.**

By signing this form I acknowledge the following:

By signing this worksheet, I certify that all of the information reported to qualify for Federal/State student aid is complete and correct. If asked by an authorized official, I agree to provide proof of the information I have given on the form. Warning: If you purposely give false or misleading information, you may be fined, sent to prison, or both.

Signature is **required** of at least one parent/stepparent whose information has been reported on this form.

Parent signature _____ Date _____