



Office of Scholarships & Financial Aid  
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Student's ID: \_\_\_\_\_  
 Student's Last Name: \_\_\_\_\_  
 Student's First Name: \_\_\_\_\_

### Non-Tax Filer Worksheet – 2015 Tax Year

Your 2017-2018 Free Application for Federal Student Aid (FAFSA) was selected for a process called "Verification." UNCW is required to confirm the information you and your parent(s) or spouse reported on your FAFSA. Accurate completion of this form is required in order to verify and process your 2017-2018 financial aid application.

**Instructions:** This form must be completed if you and/or your parent(s), (dependent) or by you and/or your spouse, (independent) are a U.S. citizen, eligible non-citizen, and/or U.S. resident and are *not required to file a 2015 U.S. federal tax return*. You must attach copies of all W-2 form(s) and/or 1099 form(s) received in 2015. If you are not able to provide a W2(s) or 1099(s), you must request a *Wage and Income Tax Transcript* from the IRS. If you are not sure if you were required to file, visit <https://www.irs.gov/uac/Do-I-have-to-File-a-Tax-Return%3F>.

#### Student's Section

By checking the following box I, the student, certify that I did not work and will not receive a W-2 for the 2015 tax year.

If you worked at any time from 1/1/15 – 12/31/15 please list all sources and amounts of income received for this period.

Income Source	W2 Received?				Amount
	Yes		No		
	Yes		No		\$
	Yes		No		\$
	Yes		No		\$

Total: \$ \_\_\_\_\_

#### Parent's or Spouse's Section

\_\_\_\_\_  
 Last Name First Name M.I.

By checking the following box I certify that I did not work and will not receive a W-2 for the 2015 tax year.

Relationship to student: Parent  Spouse

If you worked at any time from 1/1/15 – 12/31/15 please list all sources and amounts of income received for this period.

Income Source	W2 Received?				Amount
	Yes		No		
	Yes		No		\$
	Yes		No		\$
	Yes		No		\$

Total: \$ \_\_\_\_\_

By signing this form, I certify that I did not and am not required to file a 2015 U.S. federal tax return. All of the information on this form is true and complete to the best of my knowledge. If requested, I agree to provide further documentation to substantiate the information provided.

\_\_\_\_\_  
 Student's Signature (must be signed by hand, not typed)

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Parent or Spouse's Signature (must be signed by hand, not typed)

\_\_\_\_\_  
 Date