

Verification of 2022 Income for Nontax Filer-PARENT

Office of Financial Aid and Scholarships

P.O. Box 3011, Commerce, Texas 75429 Phone: 903.886.5096 Fax: 903.886.5098 <u>FAO.Verification@tamuc.edu</u>

STUDENT'S NAME	CWID	
The instructions and certification below apply to each parent WILL NOT FILE and ARE NOT REQUIRED to file a 20		
Check the box that applies:		
Parent(s) was not employed, and parent(s) had NO	income earned from work in 20	022.
One or both parents were employed in 2022. List be employer in 2022, and whether and IRS W-2 form parent(s). List every employer even if the employer	is provided. Attach copies of al	1 2022 IRS W-2 forms issued to the
Employer's Name	Annual Amount Earned in 2022	Copy of IRS W-2 Attached? Yes/No
(Example) Lucky Leo Landscape	\$800	Yes
Total Amount of Income Earned From Work	\$	
fmore space is needed, provide a separate page with the student's name an	nd CWID number at the top.	
Note: The Financial Aid & Scholarships Office may requinax return transcript was not filed with the IRS.		S that indicates a 2022 IRS income
Γhe appropriate person(s) need to sign this acknowledgemen	t of non-filing tax status.	
Certification and Signature: You, the student, and/or the part. All of the information provided is true and complete to the best of your 2. All federal and/or state financial aid received as a result of the information merce. Sommerce. Agree to provide information requested by the Office of Financial Aid & Scholarships if changes occur to the Agree to provide information requested by the Office of Financial Aid & Scholarships has the augusted to the Acknowledge that the Office of Financial Aid & Scholarships has the auguster Transcript(s) and/or any other documents from other entities/6. All parties who sign this form certify you are aware that purposely given both.	r knowledge. ation on this form will be used solely to the information provided. & Scholarships to verify the accuracy athority to verify information request (agencies that can collaborate on the	for purposes to pay the cost of attending A&M- of this completed form and/or clear conflicting ed and such information may include IRS Tax accuracy of the information provided.
Signature of non-filing person (parent 1)		Date
Signature of non-filing person (parent 2)		Date