



2020-21 VERIFICATION OF INCOME FOR NON-TAX FILERS

Please complete this form on a computer, or use black or blue ink.

STUDENT NAME _____ CCC ID# OR LAST 4# OF SSN _____

You indicated on your FAFSA that you or someone in your household (spouse or parent) will not file and are not required to file a 2018 federal income tax form with the IRS. That individual must complete this form. If the non-tax filer status applies to more than one person, each non-filer will need to complete a separate form.

NON-TAX FILER

NON-TAX FILER NAME _____ RELATIONSHIP TO STUDENT (STUDENT/SPOUSE/PARENT) _____

CHECK THE BOX THAT APPLIES TO THE NON-FILING TAX PERSON:

I was not employed and had no income earned from work in 2018. I was not required to file a tax form.

I was employed in 2018 but did not file a federal income tax form. I was not required to file.
Attached are copies of my 2018 W-2 forms.

List all employer(s) even if the employer did not issue you an IRS W-2 form.

EMPLOYER	2018 Work Income	Did you receive a W-2 form?
Total Amount of Income Earned from Work	\$	

CERTIFICATION

Signing below certifies that all of the information reported is complete and correct. An electronic signature is not valid.

WARNING: If you purposely give false or misleading information, you may be fined, sent to prison, or both.

NON-FILER SIGNATURE _____ DATE _____

Please return this form to the Financial Aid Office at the location you plan to attend:

Central Community College – Columbus	PO Box 1027	Columbus, NE 68602-1027	Fax: 402-562-1290
Central Community College – Grand Island	PO Box 4903	Grand Island, NE 68802-4903	Fax: 308-398-7407
Central Community College – Hastings	PO Box 1024	Hastings NE 68902-1024	Fax: 402-461-2447
Central Community College – Kearney	PO Box 310	Kearney, NE 68848-0310	Fax: 308-338-4041

PROCEED TO THE NEXT PAGE UNLESS YOU ARE A DEPENDENT STUDENT (PARENTAL INFORMATION WAS REQUIRED ON YOUR FAFSA).



2020-21 VERIFICATION OF INCOME FOR NON-TAX FILERS – PAGE 2

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NON-TAX FILER

NON-TAX FILER NAME _____ RELATIONSHIP TO STUDENT (STUDENT/SPOUSE/PARENT) _____

OTHER INCOME SOURCES

THE NON-TAX FILER RECEIVED THE FOLLOWING PUBLIC ASSISTANCE (FAMILY INCLUDED, IF APPLICABLE) IN 2018 OR 2019.

- | | |
|--|--|
| <input type="checkbox"/> ADC/AFDC | <input type="checkbox"/> VA Benefits (yearly) \$ _____ |
| <input type="checkbox"/> Food Stamps | <input type="checkbox"/> Workman’s Compensation |
| <input type="checkbox"/> Medicaid/Untaxed Social Security Benefits | <input type="checkbox"/> Other _____ |

THE NON-TAX FILER WAS SUPPORTED IN 2018 BY:

- Family Member Name _____ Relationship _____
- Friend/Significant Other Name _____

PLEASE PROVIDE A BRIEF STATEMENT OF HOW THE NON-TAX FILER/NON-TAX FILER FAMILY WAS SUPPORTED.

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