



# Student Nontax Filer Income Verification

Student's First Name:	<input type="text"/>	Madonna ID #:	<input type="text"/>
Student's Last Name:	<input type="text"/>	Student Social Security #:	<input type="text"/>

**Your 2021-2022 Free Application for Federal Student Aid (FAFSA) was selected for review in a process called verification.** The Office of Financial Aid will compare the requested information against the information reported on the FAFSA before we make any Financial Aid awards.  
**Please submit all requested documents within 30 days.**

## Section A: Personal Information

Student's Street Address (include apt. no.)		Student's Date of Birth	
City	State	Zip Code	

## Section B: Verification of 2019 Income Information for Student. If you are married, please include your Spouse.

**Complete this section if you will not file and are not required to file a 2019 income tax return with the IRS. If you are married, do the same for your spouse.**

### Check the box that applies:

- I/We were unemployed and had no income earned from work in 2019.
- I/We student and/or spouse were employed in 2019 and have listed below the names of all employers and the amount earned from each employer in 2019. Provide copies of all 2019 IRS W-2 forms issued to the student and spouse by their employers. List every employer even if the employer did not issue an IRS W-2 form. *If more space is needed, attach a separate page with the student's name and Student Number at the top.*

Employer's Name	Total Amount Earned in 2019
Suzy's Auto Body Shop (example)	\$2,000.00 (example)

- √ I certify that all information reported on this form is complete and correct. I understand that changes in my FAFSA financial information based on the documentation provided may result in a change in financial aid eligibility.
- √ I understand that by signing this form that I, the student, am legally obligated to pay all tuition and fees at Madonna University. In the event of default, the University may refer my account to a credit reporting agency, a collection agency, and/or initiate legal action to recover any outstanding debt. I understand that I am also responsible for the costs of collection including interest, penalties, collection agency fees, court costs and attorney fees.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_