



Financial Aid Office

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2022-2023 Verification of Income Information for Nontax Filers

Student Name \_\_\_\_\_ Student ID # \_\_\_\_\_

Your FAFSA indicates that you WILL NOT FILE a 2020 tax return:

Please indicate:

1. [ ] The student, student's spouse (if applicable), and/or student's parent(s) (if applicable) was/were not employed and had no income earned from work in 2020.

OR

2. If you reported work earnings on your FAFSA and you were not required to file a 2020 U.S. Federal Income Tax Return, review the amounts you listed on your 2022-2023 FAFSA. Information on this form must agree with the amount(s) you indicated; if it does not agree, by completing and signing this form you are verifying that the information on this form is true, complete, and correct to the best of your knowledge and belief.

[ ] The student, student's spouse (if applicable) and/or student's parent(s) (if applicable) was/were employed in 2020 and has listed below the names of all employers, the amount earned from each employer in 2020, and whether an IRS W-2 form is attached. Attach copies of all 2020 IRS W-2 forms issued by employers. List every employer even if they did not issue an IRS W-2 form. If more space is needed, attach a separate page with the student's name and student id number at the top.

Table with 4 columns: Employer's Name, W-2 Provided (Y or N)? If not, explain:, 2020 Amount Earned, Person's Name

[ ] I/we have attempted to obtain the Verification of Non-Filer from the IRS or other tax authorities and was unable to obtain the required documentation; and have not filed and I/we are not required to file a 2020 income tax return.

Certifications and Signatures: Each person signing below certifies that all of the information reported is complete and correct. WARNING: If you purposely give false or misleading information you may be fined, be sentenced to jail, or both.

If a Dependent Student, the student and one parent whose information was reported on the FAFSA must sign and date.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_