



**Student Services Center**  
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 Fond du Lac, WI 54936-1940  
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 1-800-472-4554  
 financialaid@morainepark.edu

NSTX16

## 2015-2016 Student Nontax Filer's Form

Fill out Completely and Return to the Student Services Center

This form is to be completed and returned to the Financial Aid Office if a student did not file a 2014 federal income tax form.

Student Name \_\_\_\_\_

Student ID Number \_\_\_\_\_

List all sources of earned and untaxed income and benefits that you (and/or your spouse) received in 2014.

**This form will be considered incomplete if any items are left blank or the form is completed with all zeros, and will delay processing of your financial aid award.**

### BE SURE TO LIST TOTAL YEAR AMOUNTS NOT MONTHLY

	<b>2014 Total Year Amount</b>
Student Income Earned From Work <i>(Must attach all W2s from employer)</i> (Employer's name) _____	\$ _____
Spouse's Income Earned From Work <i>(Must attach all W2s from employer)</i> (Employer's name) _____	\$ _____
Welfare/Wisconsin Works (W-2) Benefits/TANF	\$ _____
Child Support (Include Disregard Payment if on Wisconsin Works (W-2))	\$ _____
Earned Income Credit	\$ _____
Foreign Income Exclusion	\$ _____
Social Security	\$ _____
Supplemental Security Income (SSI)	\$ _____
Unemployment Compensation	\$ _____
Untaxed Capital Gains	\$ _____
Untaxed Dividends	\$ _____

**Other Untaxed Income and/or Earnings (if you indicated all zeros in the items above, please indicate how you lived/paid bills during 2014)**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I (We) hereby certify that no income tax return has been or is required to be filed for the 2014 calendar year and that **all** 2014 income and benefits are reported in this statement.

\_\_\_\_\_  
 Student's Signature

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Spouse's Signature (optional)

\_\_\_\_\_  
 Date