

OFFICE OF FINANCIAL AID financialaid@edgecombe.edu

Tarboro Campus: 2009 W. Wilson Street Tarboro, NC 27886 T: 252.823.5166 F: 252.824-3990 Rocky Mount Campus: 225 Tarboro Street Rocky Mount, NC 27801 T: 252.446.0431 F: 252.824-3990

2023-2024 Verification of 2021 Income Information for Parent Nontax Filer

STUDENT NAME: _____

STUDENT ID: _____

Important Note: The instructions below apply to each parent included in the household. Notify the financial aid office if the parents filed separate IRS income tax returns, filed an amended return, or had a change in marital status after December 31, 2021.

Check all boxes that apply:

□ PARENT 1: I, ______,

Have now filed a 2021 income tax return(s). Provide an IRS Tax Return Transcript or a signed copy of the federal tax return you submitted to the IRS.

Did not file an income tax return and was not employed in 2021.

Did not file and was not required to file an income tax return, but was employed in 2021. Please provide all W2s and 1099-MISC (net earnings did not exceed \$400 for self-employment) or an IRS Wage & Income Transcript. Also complete the table below listing each source of income.

□ PARENT 2: I, _____,

Have now filed a 2021 income tax return(s). Please provide an IRS Tax Return Transcript or a signed copy of the federal tax return you submitted to the IRS.

Did not file an income tax return and was not employed in 2021

Did not file and was not required to file an income tax return, but was employed in 2021. Please provide all W2s and 1099-MISC (net earnings did not exceed \$400 for self-employment) or an IRS Wage & Income Transcript. Also complete the table below listing each source of income.

Employer's Name	IRS W-2 Provided? If NO, Why is it not available	Annual Amount
		Earned in 2021
(Example) ABC's Auto Body Shop	Yes	\$4,500.00
Total Amount of Income Earned From Work		\$

Student	Name:

An IRS Tax Return Transcript or other IRS documents can be obtained through the:

- Online Request Go to www.IRS.gov, under the Tools heading, click "Get a tax transcript." Click "Get Transcript ONLINE" or "Get Transcript by MAIL." Make sure to request the "IRS Tax Return Transcript" and NOT the "IRS Tax Account Transcript."
- Automated Telephone Request 1-800-908-9946 (IRS Tax Return Transcript only)
- Paper Request Form IRS Form 4506-T (check box 6a for return transcript, box 7 for Verification of Non-filing letter, or box 8 for a Wage and Income transcript) or IRS Form 4506T-EZ.
- A signed and dated copy of 2021 parent and/or parents 1040 (Include Schedule 1, 2, and 3)

CERTIFICATION AND SIGNATURES

Each person signing this worksheet certifies that all of the information reported on it is complete and correct. Signatures from both the student and the parent(s) are required below.

Read, Sign, and Date

If you are the student, by signing below you certify that you (1) will use federal and/or state student financial aid only to pay the cost of attending an institution of higher education, (2) are not in default on a federal student loan or have made satisfactory arrangement to repay it, (3) do not owe money back on a federal student grant or have made satisfactory arrangement to repay it, (4) will notify your school if you default on a federal student loan, and (5) will not receive a Federal Pell Grant for more than one school for the same period of time.

If you are the parent or the student, by signing this application you agree, if asked, to provide information that will verify the accuracy of your completed form. This information may include your U.S. income tax transcripts. Also, you certify that you understand that the Secretary of Education has the authority to verify information reported on your application with the Internal Revenue Service and other federal agencies. If you sign any document related to the federal student aid programs electronically using an FSA ID, you certify that you are the person identified by the FSA ID and have not disclosed that FSA ID to anyone else. If you purposely give false or misleading information, you may be fined \$20,000, sent to prison, or both.

By signing below you are authorizing Edgecombe Community College to make corrections to your original and/or subsequent applications based on the documents you are now submitting. The student (and at least one parent) whose information was given on the original application should sign below.

Student's Signature

Parent 1's Signature

Parent 2's Signature

ECC ID#

Date

Date

Date