Parent
Non-Tax Filer Verification
2026-2027

HASTINGS COLLEGE

Student's Name: _____   **HC ID# or last 4# of SSN:** _____

We have received your student's 2026-2027 Free Application for Federal Student Aid (FAFSA). Your student's FAFSA was selected for a process called "Verification". Hastings College is required by federal regulation to collect information to verify that the FAFSA is accurate. Any corrections made based on this documentation will be reported to you by the Federal Student Aid Center on an updated Student Aid Report.

Each <u>non-tax filer</u> must complete and sign below.

Parent 1 Name: _____
2024 Income Information for Non-tax filer
Only complete if parent did not file a 2024 income tax return

☐   Parent 1 was not employed and had no income earned from work in 2024.

☐   Parent 1 had income in 2024 but was not required to file a 2024 tax return
   o   Complete table below AND submit all 2024 W-2(s)
   o   List every employer even if the employer did not issue you a W-2 form

Parent 1 Information		
Employer Name	W-2 Received? (Y/N)	Amount Earned in 2024
		$
		$
		$
		$

Parent 2 Name: _____
2024 Income Information for Non-tax filer
Only complete if parent did not file a 2024 income tax return

☐   Parent 2 was not employed and had no income earned from work in 2024.

☐   Parent 2 had income in 2024 but was not required to file a 2024 tax return
   o   Complete table below AND submit all 2024 W-2(s)
   o   List every employer even if the employer did not issue you a W-2 form

Parent 2 Information		
Employer Name	W-2 Received? (Y/N)	Amount Earned in 2024
		$
		$
		$
		$

The parent whose information was provided above must sign and date certifying that all of the information reported is complete and correct. My signature indicates I understand if I purposely give false or misleading information, I may be fined, sent to prison or both.
*All signatures must be physical signatures, digital and typed signatures will not be accepted.

_____   _____   _____
Parent 1 Signature   Date   Phone Number

_____   _____   _____
Parent 2 Signature   Date   Phone Number