

Office of Financial Aid

PARENT NON-TAX FILER'S STATEMENT

Student's Name	HCC id		
Address			
Student's Date of Birth//	Student's Phone Number		
Complete this statement if you (student's parent was not required to file a 2021 U.S. federal tax r	eturn.		
List below all of the sources and amounts of mo untaxed income (e.g., AFDC, SSI, military living			
 In addition to this form, you must submit 1) All earnings statements (e.g., W-2, 1099) 2) Verification of Non-filing Letter from the or filing the <u>IRS Form 4506-T</u>). 		by using t	he <u>IRS Get Transcript Tool</u>
Who is completing this form? Parent 1 Parent 1 Name: Parent 2 Name:	Parent 2 Both Parent 1 and Pare	nt 2	
Source of 2021 Is	ncome		Amount
300126 01 2021 1			
Total			
Certification			
By signing this form, I certify that I did not and that all of the information reported on this form			
Parent 1 Signature		Date	/
Parent 2 Signature (if applicable)		Date	
Please submit completed and signed form, along	with supporting documentation, to the Ho	olv Cross Co	ollege Office of Financial Aid:

Email: financialaid@hcc-nd.edu Mail: PO Box 308 Notre Dame, IN 46556-0308 Fax: 574.239.8323