

☐ Confirmation of non-filing provided

☐ Confirmation of non-filing to be provided later

Parent Nontax Filing Statement

Telephone: (757) 446-5804

(757) 446-7993

finaid@evms.edu

FAX:

Email:

(Form Use: Title VII Loan for Disadvantaged Student & Student Selected for Verification)

itudent's Name	SSN	
Program / Expected Graduation Year	Award Year: 2020-2021	
CERTIFICATION		
his certification applies to both parents, if marrie	ed. Check the box that applies:	
☐ Neither parent was employed nor had income	earned from work in 2018 and did not and	was not required to fi
One or both parents were employed in 2018 buisted below are the names of all employers, the acord was not provided. (Attach copies of all 2018) If more space is needed, provide a separate of the space is needed, provide a separate is needed.	amount earned from each employer in 2018	3, even if an IRS W-2
Employer's Name	2018 Amount Earned	IRS W-2 Provide
		Yes
	W ADE DECUMPED TO 50 5 A 1/ 2 5505	DAL TAX DETUCK
DO NOT COMPLETE THIS FORM IF YOU Note: If you purposely give false or misleading informations eligibility of Title IV funding. By signing this certification, I/we certify that a my/our knowledge and I/we agree, if asked completed form.	all of the information provided is true an	rison, or both, and the s
Note: If you purposely give false or misleading informations of the IV funding. By signing this certification, I/we certify that a my/our knowledge and I/we agree, if asked	ation, you may be fined up to \$20,000, sent to p all of the information provided is true an	rison, or both, and the s