



**Eastern Virginia Medical School
Financial Aid Office**
700 Olney Road, Rm 1169
Norfolk, Virginia 23507

Telephone: (757) 446-5804
Fax: (757) 446-5817

Non-Filing Statement 2007 Federal Income Tax Return

This form must be completed if you **have not and will not** file a 2007 Federal Income Tax Return.

Name

SSN

Program

Expected Graduation Year

CERTIFICATION

I/We verify that I/we **did not** and **will not** I/we file a 2007 Federal Income Tax Return (Form 1040, 1040A, 1040EZ or 1040 TeleFile) for the 2007 tax year. If asked by an authorized individual, I/we agree to give proof for any of the information provided. I/We further understand that any false statement herein will result in the denial of ALL Title IV Funds.

Student/Spouse did not and will not file:

STUDENT SIGNATURE

Date

SPOUSE SIGNATURE

Date

Parents did not and will not file:

FATHER/STEPFATHER SIGNATURE

Date

MOTHER/STEPMOTHER SIGNATURE

Date

DO NOT COMPLETE THIS FORM IF YOU ARE REQUIRED TO FILE A FEDERAL TAX RETURN.