Southeastern Illinois College
Financial Aid Office
3575 College Rd.
Harrisburg, IL 62946
Phone: (618) 252-5400 Fax: (618) 252-3062
Email: fao@sic.edu

2026-2027
Parent Nontax Filer Income Verification

Student Name: _____ ID#: _____

Address: _____
Street City State Zip

Phone: _____ Email: _____

By completing this document, I certify that neither parent has filed nor is required to file a 2024 income tax return, and all their income earned from work, other income, and resources for the 2024 tax year are listed below.

☐ I certify that neither parent was employed, and neither had income earned from work in 2024.

☐ One or both my parents were employed in 2024 and have listed below the names of all employers, the amount earned from each employer in 2024, and whether an IRS W-2 form or an equivalent document is provided. (Provide copies of all 2024 IRS W-2 forms issued to your parents. List every employer even if the employer did not issue an IRS W-2 form. If more space is needed, provide a separate page with your name and ID number at the top.)

Employer	IRS W-2 or an equivalent document provided?	Annual Amount Earned in 2024
		$
		$
		$
Total Amount of Income Earned from Work		$

☐ One of both of my parents had other income and resources that supported us for the 2024 tax year. (List each source of income in the table below. If more space is needed, provide a separate page with your name and ID number at the top.)

Source of Income	Annual Amount in 2024
	$
	$
	$
Total Amount of Income	$

_____ _____
Student's Signature Date

_____ _____
Parent's Signature Date

WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or