

## Tohono O'odham Community College Student/Spouse Non-Tax Filer Statement 2023-2024 Academic Year

Your 2023-2024 Free Application for Federal Student Aid (FAFSA) was selected by the Department of Education (DOE) in a process called Verification. As a result, we are required to confirm some of the information reported on your FAFSA. Please complete, sign, date and return this form to our office as quickly as possible. If there are changes needed to your FAFSA, we will make those corrections and you will receive a new Student Aid Report at the email address you listed on your FAFSA. Once our Verification review is complete, we will then be able to determine your eligibility for federal aid for the 2023-2024 academic year. If you have questions, our contact information is listed at the bottom of this form.

A. Student Informati	on				
Last Name	First Name	M.I.	TOCC ID N	TOCC ID Number	
Address (include apt number)			Date of Bir	Date of Birth	
City	State	Zip Code		Phone Number (include area code) Can you receive a text at this number? Yes No	
Email address			ies	INO	
B. Student Non-Tax l	Filing Statement				
I was employed in 2 form is attached. As	ttach copies of all 2021 IRS W-2 2 form. If more space is needed	mes of all my emp 2 forms issued to 5, please continue of	you by employer(s). List even the back of this form.		
The Auto Body Sh	Employer's Name		<b>021 Amount Earned</b> \$ 2,000.00 (example)	IRS W-2 Attached?  Yes (example)	
The Auto Body Sh	ор (елитріе)		\$ 2,000.00 (example)	res (example)	

Student Spouse: Last Name	First Name	M.I.	
I,		(Student Spouse Name).	will not file and are not required
I,to file a 2021 federal income tax retui	n with the Internal Revenue	Service (IRS). Check the box that	t applies:
Student Spouse listed above was	not employed and had no in	come earned from work in 2021.	
and whether an IRS W-2 form is	attached. Attach copies of a	w are the names of all Spouse employed at 12021 IRS W-2 forms issued to yo f more space is needed, please continuous from the space is needed.	ur spouse by employer(s). List
Employer	's Name	2021 Amount Earned	IRS W-2 Attached?
The Auto Body Shop (example	e)	\$ 2,000.00 (example)	Yes (example)
L			1
This section D is being skipped a This section D is being skipped a Statement of Support is listed bel Please provide our office with a brief such as those for housing, food and tr continue on the back of this form.	s I am married, and my spou ow: statement as to how you (an	ase has listed earnings above in Sect	ing the costs of your basic needs,
E. Certification and Signatures			
Each person signing this worksheet coinformation reported on it is complete. The Student must sign and date. If the is complete, the Student Spouse signal	e and correct. e Spouse Section D	misleading inform	ou purposely give false or nation on this worksheet, you sentenced to jail, or both.
Student Signature		Date	

Submit this worksheet to the Financial Aid Office at Tohono O'odham Community College.
TOCC LOCATION: S-cuk Du'ag Maşcamakuḍ

Date

Student Spouse Signature

TOCC MAILING ADDRESS: P.O. Box 3129 Sells, AZ 85634

TOCC PHONE NUMBER: 520.479.2312 TOCC EMAIL: finaid@tocc.edu TOCC FAX: 520.383.8403