

Confirmation of Non-Tax Filing Status

Tax Year 2025

2027-2028 Academic Year



WICHITA STATE
UNIVERSITY

FINANCIAL AID AND SCHOLARSHIPS

INSTRUCTIONS >>>

The information you provided on the FAFSA or Verification Worksheet indicated you did not file a 2025 federal income tax return. To proceed, verification on how your living expenses were covered in 2025 is required. Complete all sections listed below. For tax filing requirements, visit IRS.gov.

Note: If you have filed or are required to file a 2025 federal income tax return, do not complete this form. Instead, submit your 2025 federal income tax return to the Office of Financial Aid.

Section A >>>

Student's Name:	
Student's myWSU ID:	
Name of Non-Tax Filer:	
Relationship to Student:	

Check only if applicable:

- ☐ I certify that I have not, will not, and am not required to file a 2025 tax return.
- ☐ I currently do not have a Social Security Number, ITIN, or EIN

Section B >>>

Check below to confirm which statement reflects your income status for 2025:

- ☐ I was not employed during the 2025 calendar year.
- ☐ I was employed during the 2025 calendar year but was not required to file a federal tax return. (**Attach your 2025 W-2 forms or other earnings statement with this form.**)
- ☐ I earned income in another country and will provide my tax return or wage statement from that country with this form.

Please complete and provide signature on page 2

Tracking Code: NONTXF (Student)
NTXFSP (Spouse)
NTXFP (Parent)
NTXFP2 (Parent 2)

SECTION C >>>Did you receive any of the following sources of income in **2025**?

Earned Income from Work (must submit W2's or Wage Statement)	Yes ☐	No ☐	Amount per month \$_____
Other unreported income (Income from UNOFFICIAL employment, i.e., babysitting, lawncare, housekeeping, etc.)	Yes ☐	No ☐	Amount per month \$_____
Additional Earnings (Charitable giving's and winnings from the lottery, gambling or sports betting.)	Yes ☐	No ☐	Amount per month \$_____
Supplemental Security Income/Disability	Yes ☐	No ☐	Amount per month \$_____
Child Support	Yes ☐	No ☐	Amount per month \$_____
Public Assistance (TANF)	Yes ☐	No ☐	Amount per month \$_____
Social Security Benefits or Retirement Benefits	Yes ☐	No ☐	Amount per month \$_____
Worker's Compensation	Yes ☐	No ☐	Amount per month \$_____
Support from Relatives or Friends	Yes ☐	No ☐	Amount per month \$_____
Free Rent/Housing Allowances	Yes ☐	No ☐	Amount per month \$_____
Veteran's Non-Educational Benefits (pensions, death, DIC)	Yes ☐	No ☐	Amount per month \$_____
Military Housing or Food Allowances	Yes ☐	No ☐	Amount per month \$_____

CERTIFICATIONS AND SIGNATURES >>>

Warning: If you receive student aid based on incorrect information, you may have to return and/or pay fines and fees. If you purposely give false or misleading information on this form, you may be fined \$20,000, receive a prison sentence, or both.

Affirmation: By signing below, I certify that all information I have submitted is accurate and verified with supporting documentation. I understand that falsifying a signature may result in the denial of financial aid and will be reported to Student Conduct.

Signature of the Non-Tax Filer _____ Date _____

Printed Name of the Non-Tax Filer _____

Typed Signature cannot be accepted