



NON FILER STATEMENT

Name of Student (Last, First, MI)

Social Security #

Holy Cross I.D. Number

IF PARENT(S) OR STUDENT **DID NOT** FILE A 2007 FEDERAL TAX RETURN, COMPLETE THE AFFIDAVIT BELOW AND RETURN IT TO THE FINANCIAL AID OFFICE AT THE ADDRESS LISTED BELOW. WE WILL BE UNABLE TO PROCESS YOUR FINANCIAL AID APPLICATION WITHOUT THIS STATEMENT.

Check and complete applicable item(s) below (If zero income, please enter \$0.):

- Student – I did not or will not file a Federal Tax Return for 2007.

Student's earnings from work \$ _____
Interest/Dividends \$ _____
Other: \$ _____
Total taxable/non-taxable income for 2007 (If zero income, please enter \$0.) \$ _____

- Parent – I (we) did not or will not file a Federal Tax Return for 2007.

Father's earnings from work \$ _____
Mother's earnings from work \$ _____
Unemployment Compensation \$ _____
Interest/Dividends \$ _____
Veteran's Benefits \$ _____
Social Security Benefits (total for all family members) \$ _____
Child Support \$ _____
Alimony \$ _____
AFDC/TANF or other welfare benefits \$ _____
Worker's Compensation \$ _____
Housing, food or other living allowances \$ _____
Other: \$ _____
Total taxable/non-taxable income for 2007 (If zero income, please enter \$0.) \$ _____

I (we) hereby swear or affirm that the information reported on this form is true, complete and accurate to the best of my knowledge. I understand that any false statement or misrepresentation will be cause for denial, reduction, withdrawal, and/or repayment of financial aid.

Student's Signature

Date

Father's Signature

Date

Mother's Signature

Date