

2018-2019 DEPENDENT STUDENT NON-FILING FORM

Contact Information
P: 610-436-2627
E: finaid@wcupa.edu
www.wcupa.edu/finaid

Print this form out and print clearly in ink and sign where indicated. Failure to complete all fields below may delay the verification process.

Student's First Name: St	tudent's Last Name
WCU ID #:	
I, required to file a (insert year) income tax ret Complete one: If you choose YES , fill out the table below	_ (Student's name) certify that I did not file and was not turn.
NO, I had NO income or W2's in (year) YES, I had income in (year)	
Employer:	Amount:
Please provide all W2's to the Schock Financial Aid Off Student's Signature:	fice, if not submitted previously. Date:

Please return all documents by email or mail.

Mailing Address: 030 Kershner Student Service Center, 25 University Ave, West Chester, PA 19383

Email: finaid@wcupa.edu