

## 2019-2020 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:	Student's Last Name	
WCU ID #:		
	(Student's name) certify that I am not able to get an IRS tion, I certify that I did not file and was not required to file a 2017 income ta	ıx
Complete one: If you choo	YES, fill out the table below.	
NO, I had No	income or W2's in 2017.	
YES, I had in	ome in 2017.	
Employer:	Amount:	
Please provide all W2's to	e Schock Financial Aid Office with this form.	
By signing this form I certif punishable by fine, impriso	that all information is correct. Purposely providing false information is a felonent, or both.	ny
Student's Signature:	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