

## PARENT NON-TAX FILER STATEMENT INSTRUCTIONS

- Submit all application documents to 263 Farmington Ave, Farmington CT 06030-1827. Applications may be submitted in person, mail or via fax. E-mails will be accepted to secure e-mail only.

University of Connecticut  
Office of Student Financial Aid  
Services  
263 Farmington Ave Farmington,  
CT 06030-1827

Phone: (860) 679-1364 Fax: (860)  
679-1902

Secure E-mail: uchfa@appmail.uconn.edu  
Website: health.uconn.edu/financial-aid/

### Student Information

Student's Name: \_\_\_\_\_

Student's NET ID: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

### Parent Information

Parent completing this form:      Mother      Father      Mother and Father

Mother's Name: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

### Documentation Required

Father's income from work during 2021(Provide W-2)	\$
Mother's income from work during 2021 (Provide W-2)	\$
Unemployment compensation during 2021 (Provide statement)	\$
Disability Income (Provide statement)	\$
Non-taxable income for 2021 (Provide proof)	\$

### Documentation Not Required

Social Security Income for 2021	\$
Dividend Income or Interest Income for 2021 Capital Gains in 2021	\$
Net Value of Investments	\$
Total Cash, Saving and Checking	\$
<b>Total Income from All Sources</b>	<b>\$</b>

Signature(s) below certify that the information provided is true and complete. 2021 Federal Tax Return(s) have not and will not be filed.

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Father's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Mother's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Original signature(s) Required**