Lander University Financial Aid Office

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Parent(s) 2021 Foreign Income Verification

Student's Last Name **First** **MI** **Lander ID (L#)**

Parent/Step-parent 1 Name: _____ **Parent/Step-parent 2 Name:** _____

In order to complete verification and determine eligibility for federal student aid, we must confirm that the **student's parents/step-parents' 2021** income on the FAFSA.

1. **If parent/step-parent filed a foreign tax return in 2021,** provide a copy with a translation to English and a conversion to U.S. Dollars.

2. **If parent/step-parent had income in 2021, but taxing authority in country of residence doesn't provide a free tax return transcript, please:**

   a. submit a **wage earning summary** from each employer for **January 1, 2021 – December 31, 2021** AND

   b. complete the chart and certification below

Employee Name ("Parent" or "Step-parent")	Employer's Name or Source of Income	Annual Amount Earned in 2021
	(Example) ABC's Auto Body Shop	*$4,500.00*

I hereby certify that I have contacted the taxing authority of my country of residence and confirmed that the taxing authority does not provide a free tax return transcript OR that there is no taxing authority in my country of residence. By signing this form, I certify that all information is complete and correct.

_____ _____

Signature of Parent **Date** **Phone #**

3. **If parent/step-parent did not have income in 2021**

   a. Provide a verification of non-filing letter from the taxing authority of your country of residence **OR**

   b. **If the taxing authority doesn't provide a letter of non-filing or there is no taxing authority in the country of residence,** complete the certification below:

   I hereby certify that either my country of residence does not have a taxing authority OR I have contacted the taxing authority and confirmed that it does not provide proof of non-filing. By signing this form, I certify that all information is complete and correct.

   _____ _____

   Signature of Parent Non-Filer **Date** **Phone #**

DATA ENTRY		Financial Aid Office Use Only (COUNSELOR REVIEW)	
RRAAREQ	N=Pending Review; I=Incomplete	2223 FSAH p. 10 & 52	
Initials/date Fwd to CNSLR date		COUNSELOR INITIAL/DATE	