

Student Non-Filer Statement

2026-2027 (Fall 2026, Spring 2027, Summer 2027)



Office of Financial Aid
UNIVERSITY OF COLORADO BOULDER

Name: _____

Student's Name (Last, First, M.I.)

ID: _____

Student Identification Number (SID)

Complete this form if you (the student) or student's spouse are not required to file a 2024 federal income tax return (i.e. Form 1040, a tax return from Puerto Rico, or a foreign income tax return). If you're not sure if you are required to file a 2024 federal income tax return, visit www.colorado.edu/financialaid/filing.

1. Did your parent(s) or anyone else claim you as a dependent on their **2024** tax return?

Yes

No

2. What was your marital status as of the date your FAFSA was originally completed? (select one)

Single (separated, divorced, widowed, or never married)

Married (married, remarried)

3. Did you file or were you required to file a **2024** federal tax return?

Yes (Submit a copy of your federal tax return transcript to our office and do not include your info in step 4)

No (Include yourself in step 4)

4. Indicate your employment type and provide annual work income received in **2024**.

Include all earnings from work, even if a W-2 was not received. Enter "0" if no income; do not leave any lines blank.

Student Work Income from Company/Organization

Student Total Work Income from Company/Organization Report amounts from W-2(s). \$ _____

Student Other Work not Reported on W 2's

List the source of work (i.e. babysitting, dog walking, lawn care, etc.) and total net earnings for each.

Net earnings = income minus any related expenses.

Source: _____ \$ _____ Source: _____ \$ _____

Source: _____ \$ _____ Source: _____ \$ _____

5. Did your spouse (if married) file or are they required to file a **2024** federal tax return?

Yes (Submit a copy of your spouse's federal tax return transcript to our office and do not include their info step 6)

No (continue to step 6)

Not Applicable (continue to step 7)

6. Indicate your spouse's employment type and provide annual work income received in **2024**.

Include all earnings from work, even if a W-2 was not received. Enter "0" if no income; do not leave any lines blank.

Spouse's Name: _____ Spouse's Birthdate (Month/Year): _____

Spouse's Work Income from Company/Organization

Spouse's Total Work Income from Company/Organization Report amounts from W-2(s). \$ _____

Spouse's Other Work not Reported on W 2's

List the source of spouse's work (i.e. babysitting, dog walking, lawn care, etc.) and total net earnings for each.

Net earnings = income minus any related expenses.

Source: _____ \$ _____ Source: _____ \$ _____

Source: _____ \$ _____ Source: _____ \$ _____

7. Submit your **2024 W-2's** along with this form and include Student ID Number on all pages.

By signing this form, I certify that all the information provided is complete and accurate.

Student signature

Electronic and typed signatures are not accepted.

Date

Please submit your form by mail or online at www.colorado.edu/financialaid/forms/secure-document-upload

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