



Office of Student Financial Aid  
2400 Gillionville Road  
Albany, GA 31707-3098  
Telephone 229-317-6746  
FAX 229-317-6607

**NON-FILER'S STATEMENT FOR 2006 INCOME TAX RETURN  
1040, 1040A, 1040EZ, 1040TEL**

Check the box below if it concerns you or your parent's 2006 federal tax return (1040, 1040A, 1040EZ, 1040TEL)

**Student/check one**

- I have not filed
- I will not file
- I am not required to file

**Mother/Stepmother/check one**

- I have filed
- I will not file
- I am not required to file

**Father/Stepfather/check one**

- I have not filed
- I will not file
- I am not required to file

All information on the student aid report used to calculate my Pell grant award is complete and correct. By signing this statement, we certify that the information reported on it is correct.

**Warning: if you purposely give false or misleading information on this statement, you may be fined, be sentenced to jail, or both.**

Father/Stepfather Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Mother/Stepmother Signature: \_\_\_\_\_ Date \_\_\_\_\_

Student's Signature: \_\_\_\_\_ SSN/School ID: \_\_\_\_\_

Date \_\_\_\_\_