



FINANCIAL AID OFFICE

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Morrilton, AR 72110

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1-800-264-1094
Fax: (501) 977-2123

www.uaccm.edu

Name: _____ **Student ID No.:** _____
(Last Name) (First Name)

C. PARENT TAX/INCOME INFORMATION: IF PARENT CONSENT WAS GIVEN TO RETRIEVE AND DISCLOSE FTI WAS USED, SKIP THIS SECTION.

Did or will you (and/or your spouse) file a Federeal Income Tax Return for 2024? Yes No

If you answered YES, update your FAFSA by giving consent to retrieve and disclose FTI or attach a copy of your 2024 Federal tax return transcript from the IRS or a signed copy of your 2024 income tax return.

- To give consent to retrieve and disclose FTI, log into your FAFSA online at: studentaid.ed.gov/sa/fafsa.
- Request a free copy of your 2024. Federal tax return transcript on the IRS website at www.irs.gov; click on "Get My Tax Record" enter information as requested; select Type -Return Transcript and 2024 year or call 1-800-908-9946.

If you answered NO:

- Attach a copy of your 2024 W-2s and unemployment documents (if applicable) and identify your untaxed earnings in the table below for parent and spouse (if applicable)
- Attach a copy of the Non-Filing Letter from IRS at www.irs.gov for parent and spouse (if applicable)

D. PARENTS' FAMILY SIZE INFORMATION: MUST BE COMPLETED WHETHER TAXES WERE COMPLETED

Name	Age	Relationship to Student

I hereby certify that all statements and information provided on this form are true, complete, and correct to the best of my knowledge and belief. If asked by an authorized official, I agree to give proof of the information that I have given on this form. I understand it is a federal crime to purposefully give false or misleading information on this form and that any person doing so may be subject to a fine, imprisonment, or both. (Signatures must be provided by the student and one parent who is listed on the FAFSA.)

Signature: _____ **Date:** _____
(Student)

Signature: _____ **Date:** _____
(Parent)