



## 2016-2017 TAX EXTENSION FILERS FOR 2015 TAX YEAR – PARENT

Student Name: \_\_\_\_\_ Student ID: \_\_\_\_\_

Your 2016-2017 Free application for Federal Student Aid (FAFSA) was selected for a process called "Verification". CSUSM is required to confirm the information you and your parent(s) reported on your FAFSA. Accurate completion of this form is required in order to verify and process your 2016-2017 financial aid application.

Your parent(s) must provide the Financial Aid Office with the following documentation:

1. A copy of IRS form 4868, "Application for Automatic Extension of Time to File U.S. Individual Income Tax Return," that you filed with the IRS for tax year 2015; **OR**
2. A copy of the IRS's approval of an extension beyond the automatic six month extension if you requested an additional extension of the filing time for tax year 2015 and copies of your 2015 W-2's for EACH source of employment income received; **OR**
3. If you were self-employed, please use the space below to certify the amount of the AGI and the U.S. income tax paid for tax year 2015 along with copies of all 1099's received.

2015 Self – Employment Certification	(Complete this only if you were self-employed in 2015)
2015 Self Employment Earnings	
2015 Additional Income Received	
2015 Projected Adjusted Gross Income	
2015 Taxes Paid	

We will make an initial financial aid offer and disbursement for the Fall 2016 semester based on the information you provide. However, we will place a hold on disbursement for Spring 2017 until your 2015 tax information can be verified by using IRS Data Retrieval Tool or by submitting a 2015 Tax Return Transcript from the IRS by December 1, 2016. For more information on how to obtain a Tax Return Transcript please refer to our Financial Aid and Scholarships website [www.csusm.edu/finaid](http://www.csusm.edu/finaid), under the Forms tab you will find "How to Obtain Your Tax Return Transcript."

Please attach the required documentation, include the student's name, CSUSM ID # and number the pages at the top of each page and submit to the Financial Aid & Scholarships Office.

By signing this form, I certify that all of the information on this form is true and complete to the best of my knowledge. If requested, I agree to provide further documentation to substantiate the information provided.

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent Printed Name and Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent Email: \_\_\_\_\_ Phone #: \_\_\_\_\_