



**Low Income &
Non-Tax Filer Form
2026-2027**
Revised: 10/15/25

Your 2024 income was reported as unusually low on your FAFSA. The Financial Aid Office cannot proceed with your financial aid application until you give us more information regarding your income for 2024. Please answer the following questions, and attach a written explanation if necessary.

Student's Name _____ Social Security # _____

Phone _____ Email _____

Annual Student Income: Please list your & your spouse's income from all sources. (All students must complete this section.)

Student/Spouse Source of Income for 2024	Total Annual \$ Amount

Annual Parental Income: Please list your parents' income from all sources. (Only Dependent students complete this section.)

Parent/Step-Parent Source of Income for 2024	Total Annual \$ Amount

Were you and your spouse (if applicable) required to file a tax return with the IRS for 2024? ☐ Yes ☐ No

Were your parents required to file a tax return with the IRS for 2024? ☐ Yes ☐ No ☐ I'm an Independent Student

If you, your spouse, or your parents were required by law to file a tax return for 2024 but did not and will not, we will be unable to proceed with your financial aid application. You must demonstrate that you did file a tax return or that you are exempt from filing, per IRS Pub. 17.

Living Expenses: Please explain below how you paid for living expenses during 2024. **DO NOT LEAVE ANY FIELDS BLANK IN THE STUDENT COLUMN!** Only dependent students must complete the Parent column. Attach another page if needed.

Living Expense	Student/Spouse Include the average monthly \$ amount and a description of how it was paid/provided for.	Parents (For Dependent Students) Include the average monthly \$ amount and a description of how it was paid/provided for.
Rent/Mortgage		
Food		
Utilities		
Clothing		
Transportation		
Medical Care		
Child Care		

I certify that this information is true and correct. If the student is considered Dependent for the purposes of financial aid, at least one parent must sign this form.

Student's Signature _____ Date _____

Parent Signature (if a Dependent student) _____ Date _____

This **completed & signed** form can be submitted via:

Mail: Nelson University, Attn: Financial Aid, 1200 Sycamore St, Waxahachie, TX 75165, **Fax:** (682)224-8644, **Email:** financialaid@nelson.edu