



Sam Houston State University Financial Aid and Scholarships Office

MEMBER THE TEXAS STATE UNIVERSITY SYSTEM

INCOME TAX WORKSHEET ~~2002~~ -2

If you make any corrections, white outs, or alterations to any of your information on this form, you MUST initial next to i

Student Name (~~blue~~ black ink only): _____ ID: SAM _____

Incomplete verification packets will NOT be accepted.

SECTION A STUDENT SECTION

Did the STUDENT/STUDENT'S SPOUSE ~~2002~~ file a return with the IRS?

Must choose one:

Already filed a tax return

WARNING: If you purposely give false or misleading information you may be fined, sentenced to jail, or both. Each person signing below certifies that all of the information is complete and correct.

Student Signature: _____ Date: _____

Parent Signature: _____ Date: _____

Return completed form to: Financial Aid and Scholarships Office
Email: PDF from SHSU Email to fadocuments@shsu.edu • Fax: 936.294.3668
Mail: Box 2328, Huntsville TX 77341-2328