

Return to: Mississippi Student Financial Aid
3825 Ridgewood Road
Jackson, MS 39211-6453

STUDENT: _____ SS#: _____

NON-TAX FILERS STATEMENT

DO NOT SIGN THIS FORM IF YOU FILED A **2009** MISSISSIPPI INCOME TAX RETURN.

***NOTE: If Military, please have your personnel office certify that your Home of Record is the State of Mississippi**

All information provided to the Student Financial Aid Office, including the Student Aid Report which will be used to calculate my (son's/daughter's/spouse's) financial award is complete and correct.

INDEPENDENT STUDENT

Signature: _____ Date: _____
(Applicant)

Signature: _____ Date: _____
(Spouse)

DEPENDENT STUDENT

Signature: _____ Date: _____
(Father)

Signature: _____ Date: _____
(Mother)

Signature: _____ Date: _____
(Applicant)

SWORN TO AND SUBSCRIBED BEFORE ME this the ____ day of _____, 2010.

SIGNATURE OF NOTARY PUBLIC

My Commission Expires:

(Seal)