Kankakee Community College

2026-2027 Parent's Spouse Tax Filing Confirmation Form

OFFICE OF FINANCIAL AID • 100 College Drive • Kankakee, IL 60901-6505 • 815-802-8550 • FAX: 815-802-8551

You are being asked to complete this form because you reported on the parent's spouse portion of the FAFSA that you have filed taxes or that you have a tax filing status, but the IRS could not find a completed tax record on file for you. Please complete and return this form to the Office of Financial Aid with any required documents as soon as possible. Corrections will be made to the student's FAFSA based on the answers below, if necessary.

Student's Last Name	Student's First Name	Student's M.I.	Student's Social Security Number
Student's Street Address (inc	clude apt. no.)	Student I.D. Number	
City	State	Zip Code	Student's Date of Birth
Student's Phone Number (include area code)			Student's Email Address
Check the box that appli	ies:		
Required Do 1. Provide 2024 schedules, or The parent was e tax authorities. Required Do 1. Provide W-2s IRS at https://	a signed copy of the translate employed in 2024 but is not re- cumentation: from all employers worked for www.irs.gov/individuals/get-to), a signed copy of the defendence of the defend	he 2024 income tax return with applicable
*Foreign Reside	n with the IRS or foreign tax a ents: Proof of non-filing requi		
rtification and Signatures	;		
ne person signing this worksheet certifies all of the information reported it is complete and correct. The parent of the student must sign and dat			WARNING: If you purposely give false or misleading information on this worksheet, you may be fined,
rent Spouse's Name (Printe	ed)	Date	be sentenced to prison, or both.
rent Spouse's Signature (R	equired)	Date	_
ıdent's Signature (Required		Date	_