

2025-2026 Blank Statement

Financial Aid Department Phone: 910-938-6749 Fax: 910-455-2767

Email: finaid@coastalcarolina.edu

Print Student's Name		Student's ID Number	
Chec	k one of the following:		
	Parent 1 on the 2025-26 FAFSA indicated that they did not file a 2023 tax return for reasons other than low income. Please explain the reason below. If you need more room, continue on back of this form.		
	Parent 2 on the 2025-26 FAFSA indicated that they did not file a 2023 tax return for reasons other than low income. Please explain the reason below. If you need more room, continue on back of this form.		
Each		ation documents submitted with this certification are e information was reported on the FAFSA must sign	
Stude	ent's Signature (Required)	Date	
Paren	nt's Signature (Required)	Date	

WARNING: If you purposely give false or misleading information, you may be fined, sent to prison, or both.