



Middle Georgia College
Office of Financial Aid

Return Completed Form To:

Office of Financial Aid - Grace Hall
1100 Second St. SE
Cochran, GA 31014
Fax: (478) 934-3448
Phone: (478) 934-3133

**SPOUSE NON-TAX FILER FORM
2011-2012 ACADEMIC YEAR**

STUDENT NAME: _____ MGC ID: _____

**STUDENT'S SPOUSE MUST COMPLETE AND SIGN THIS FORM IF
HE/SHE DID NOT FILE A 2010 TAX RETURN**

I did not file a federal 2010 tax return. I have supplied the financial aid office at Middle Georgia College with all documentation (if applicable) of my 2010 income.

- Agree with the above statement.
- Disagree with the above statement.

By signing below, I certify that the information on this form is true and complete to the best of my knowledge. I am aware that any misrepresentation will result in the denial of student financial aid by Middle Georgia College and may result in state/federal criminal indictment.

Printed Name of Spouse _____ Date: _____

Signature of Spouse _____ Date: _____