

Student Financial Aid Office 11400 Robinwood Drive Hagerstown, MD 21742 finaid@hagerstowncc.edu FAX: 301-791-9165

## 2018-2019 Amended Tax Return Form For Student/Spouse

WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.

Student Name: _			
l	₋ast Name	First Name	MI
HCC Student ID:			
For an individual wl submit the following		nal Revenue Service (IRS) income ta	ax return for 2016, please
2016 signed information	d IRS Tax Return, or any required to be verified; are py of the 2016 IRS Form	that will only include information from other IRS tax transcript(s) that included ad 1040X, "Amended U.S. Individual Inc	de all of the income and t
Please check wh	o amended their tax r	eturn:	
Student			
Spouse			
Student Signature	9:	Dat	te:
Spouse Signature:	o:	Dat	te:
	(Required for Married	Students)	
Offic	ce Use Only: IRS DRT CO	DDE SHOWS "07"? Yes or No	Initials

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