2020-2021 Amended Tax Return Form for Student/Spouse



Student Financial Aid Office 11400 Robinwood Drive Hagerstown, MD 21742

Phone: 240-500-2473 finaid@hagerstowncc.edu FAX: 301-791-9165

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

Student Name:	:		
	Last Name	First Name	MI
HCC Student II	D:		
For an individual submit the follow		nternal Revenue Service (IRS) income ta	ıx return for 2018, please
2018 sig include a ➤ A signed filed with	ned IRS Tax Return and all of the income and tax in copy of the 2018 IRS For the IRS along with all a		r IRS tax transcript(s) that
Please check	who amended their ta	ax return:	
Student			
Spouse			
☐ Both (Join	ıt Return)		
Student Signat	ure:	Dat	te:
О	Office Use Only: IRS DRT	Γ CODE SHOWS "07"? Yes or No	Initials

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