

Office of Financial Aid

2016-2017 Identify Theft Victim Statement

The purpose of this form is to document your status as a victim of IRS tax-related identity theft. You have informed us that you have been a victim of IRS tax-related identity theft, which prevents you from providing us with the normal forms of tax data required to complete the verification process. The U.S. Department of Education requires us to collect a signed and dated statement indicating that you are a victim of IRS tax-related identity theft and that the IRS has been made aware of the tax-related identity theft. Please complete and return this form to the Messiah College Financial Aid Office by US Mail, FAX, or Email. For questions, call 717.691.6007.

Student Inform (Always complete this s				
Last Name		First Name	M.I.	Messiah College Student ID
Date of Birth	Home Phone Number	Student	's E-mail	Parent's E-mail (if dependent student
	/ictim Information (if different to the student's parent or spouse is the student o)
Last Name		First Name	M.I.	_
Date of Birth	Home Phone Number	E-mail		
or using the IRS D		e Messiah College w	rith the tax data	e from providing an IRS Tax transcript, required to complete the verification theft.
Sign This Forn	<u>n</u>			
Only the person wi	no is the victim of IRS tax-rel	ated identity theft m	ust sign this forr	m.
Identity Theft Victim's Signature			Date	