



# Northeastern Illinois University Financial Aid, Scholarships and Student Employment

5500 North Saint Louis Avenue ● D Building, Room 200 ● Chicago, IL 60625-4699 ● 773-442-5016 ● Fax: 773-442-5040  
[Financial-aid@neiu.edu](mailto:Financial-aid@neiu.edu) ● [neiu.edu/financial-aid](http://neiu.edu/financial-aid) ● Check your financial aid status at [neiu.edu/neiuport](http://neiu.edu/neiuport) (My Financial Aid)

## 2026-2027 Verification of Amended Tax Return

Student's First Name

6-digit NEIU ID#

Student's Last Name

Phone Number

The federal financial aid processor, the U.S. Department of Education, has selected your Free Application for Federal Student Aid (FAFSA) for verification, which requires schools to collect documentation of the accuracy of the information provided on the application. Please complete and submit this form to the Financial Aid Office **within 7-10 business days IF you were unable to use the IRS Direct Data Exchange in the FAFSA.**

### Instructions:

Your FAFSA indicates that you or your parent(s) filed an Amended Tax Return (1040x) for the 2024 tax year. (1) Check the appropriate box beside the tax filing status stated below that applies. (2) Take the action stated next to the Tax Filing Status box selected titled "Action Required."

Tax Filing Status	Action Required
<input type="checkbox"/> I/we filed an Amended Tax Return (1040X) for the 2024 tax year. <input type="checkbox"/> Parent(s) <input type="checkbox"/> Student/Spouse	<p>▶ <b>ATTACH a signed</b> copy of the <b>2024 IRS Form 1040X</b>, "Amended U.S. Individual Income Tax Return" that was filed with the IRS.</p> <p>If you have not already so, please <b>submit an IRS Tax Return Transcript, a Record of Account Transcript</b> or a Return Transcript for Taxpayer (RTFTP).</p>
<input type="checkbox"/> I/we made a mistake on the FAFSA. I/we did not file an Amended Tax Return for 2024. <input type="checkbox"/> Parent(s) <input type="checkbox"/> Student/Spouse	<p>▶ <b>CORRECT</b> the FAFSA at <a href="http://fafsa.gov">fafsa.gov</a>.</p>



**REQUIRED SIGNATURE:** I/we certify that all information reported is complete and correct. I/we understand that changes in my FAFSA financial information based on the documentation provided may result in a change in financial aid eligibility.

Student's Signature

Date

Parent's Signature

Date

*Do not mail this worksheet to the U.S. Department of Education.  
Submit this worksheet to the Financial Aid Office at Northeastern Illinois University.  
5500 North Saint Louis Avenue (D-200)  
Chicago, Illinois 60625-4699  
Telefax: 773-442-5040  
Email: [Financial-Aid@neiu.edu](mailto:Financial-Aid@neiu.edu)*