

Office of Financial Aid

2018-2019 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 or FAX. For questions, call 717.691.6007.

Student Inform (Always complete this				
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
	Victim Information (if different times in the student's parent or spouse is the student of the s)
Last Name		First Name	M.I.	
Date of Birth	Home Phone Number	E-mail		
or using the IRS D	ata Retrieval Tool, to provide certify that I have made the I	Messiah College w	ith the tax data	e from providing an IRS Tax transcript, required to complete the verification theft.
Only the person w	ho is the victim of IRS tax-rel	ated identity theft m	ust sign this forr	n.
Identity Theft Victim's Signature		Date	Date	