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## **2016 Tax Year Co-op Earnings Statement**

Student's Name: N	U ID:
This co-op earnings statement should be completed if you participated in must attach copies of any W-2 form(s) associated with the co-op earning his form to Student Financial Services via mail, fax, or email. Please note canned.	gs. Once completed and signed, return e that emailed forms must be signed and
ist separately all of the co-op places of employment and earnings receiv. December 31, 2016.	ved from January 1, 2016 through
2016 Co-op Earnings: IMPORTANT – Attach W-2s	
Source of Income/Place(s) of Employment	Amount Earned
То	tal: \$
Certification	
By signing this form, I certify that all of the information reported on t	his form is completed and accurate.
Student's Signature:	Date: