



Pepperdine University, Seaver College
Office of Financial Assistance

2016-2017 Identity Theft Statement

You are required to submit this statement because you informed us that you (or your parents) were a victim of IRS tax-related identity theft.

Student Name: _____ CWID: _____

Student's Date of Birth: _____ Email Address: _____

Important Note:

An individual who was the victim of IRS tax-related identity theft must provide:

- A. A Tax Return DataBase View (TRDBV) transcript obtained from the IRS, or any other IRS tax transcript(s) that includes all of the income and tax information required to be verified. If you need assistance in obtaining this form, please contact the Identity Protection Specialized Unit (IPSU) at 800-908-4490.
- B. A statement signed and dated by the tax filer indicating that he or she was a victim of IRS tax-related identity theft and that the IRS is aware of the tax-related identity theft.

In the lines listed below, **the individual who is a victim of identity fraud** must provide a statement confirming that they were a victim of IRS tax-related identity theft and that the IRS is aware of this:

Return To:

Pepperdine University • Seaver College • Office of Financial Assistance
24255 Pacific Coast Highway • Malibu • California • 90263-4301 • Phone (310) 506-4301 • Fax (310) 506-4746

CERTIFICATION AND SIGNATURE

Each person signing this worksheet certifies that all of the information reported on it is complete and correct. The student and the parent who is a victim of identity-fraud must sign and date.

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

Print Student's Name

Student's Signature

Date

Print Parent's Name

Parent's Signature (Dependent Students Only)

Date

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