



Boston University Financial Assistance

2017/2018 STUDENT INCOME VERIFICATION FORM

BU Student's Name: \_\_\_\_\_ BU I.D. # U \_\_\_\_ - \_\_\_\_ - \_\_\_\_\_
First M.I. Last

STUDENT (and spouse, if applicable)

Check applicable item:

- Have already filed a 2015 U.S. Income Tax Return
Tax return filed and previously submitted to BU Financial Assistance on
Not required to file a 2015 U.S. Income Tax Return. Please explain:
Filed foreign tax return. Please specify country:

Student's earnings from work \$ /year
Self-Employed? YES / NO (please circle)
Spouse's earnings from work \$ /year
Self-Employed? YES / NO (please circle)
Interest/Dividends \$ /year
Veteran's Benefits \$ /year
Social Security Benefits (total for all family members) \$ /year
Child Support received \$ /year
Alimony received \$ /year
AFDC/TANF/SNAP or other welfare \$ /year
Worker's Compensation \$ /year
Military Housing Allowance \$ /year
Non-Military Housing, Food or Other Allowance \$ /year
Income from a Non-U.S. Tax Return \$ /year
Other \$ /year

Attach a signed copy of original return and its translation into English.

I certify that the information above is true and complete.

Student's signature Date Spouse's signature (if applicable) Date

Complete and return to: Boston University Financial Assistance, Fifth Floor, 881 Commonwealth Avenue, Boston, MA 02215