



Boston University Financial Assistance

2019/2020 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 2017 U.S. Income Tax Return
(Attach signed – even if e-filed – copy of return as actually submitted to the IRS. BU requires a copy of your tax return even if you elected to use the IRS Data Retrieval Tool when you completed your FAFSA.)
- ☐ Tax return filed and previously submitted to BU Financial Assistance on _____
- ☐ Not required to file a 2017 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 <u>Non-U.S. Tax Return</u>	\$ _____/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