



2021/2022 STUDENT INCOME/ASSET VERIFICATION FORM

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

**STUDENT** (and spouse, if applicable):

Check applicable item:

- Not required to file a 2019 U.S. Income Tax Return. Please explain:
- Filed foreign tax return. Please specify country: \_\_\_\_\_

**2019 INCOME**

Student earnings from work	\$ _____ /year
Spouse earnings from work	\$ _____ /year
Interest/Dividends	\$ _____ /year
Business Income	\$ _____ /year
Rental Income	\$ _____ /year
Veteran's Benefits	\$ _____ /year
Social Security Benefits	\$ _____ /year
Pension/IRA Distribution	\$ _____ /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 and Other Allowance	\$ _____ /year
Income from a Non-US Tax Return (translated to English)	\$ _____ /year
Other _____	\$ _____ /year

**CURRENT ASSETS**

Cash/Savings/Checking	\$ _____
Investments: Stocks, Bonds, CDs	\$ _____
Redeemed Bonds	\$ _____
Loans from Business Owner/Shareholder to Business	\$ _____
Trusts/Inheritance	\$ _____

*I certify that the information above is true and complete.*

\_\_\_\_\_  
Student signature Date Spouse signature (if applicable) Date

**Complete and submit to:** Student Financial Services  
BUSM students: osfs-med@bu.edu  
GMS students: osfs-gms@bu.edu  
GSDM students: osfs-sdm@bu.edu  
SPH students: osfs-sph@bu.edu