



Income Verification

Student Information

Student's Last Name Student's First Name Student's M.I.

Student's Street Address (include apartment number)

City State Zip Code

Home or Mobile Phone Student's Date of Birth Student's Email Address
(include area code)

Income Information (Select One):

The student (and/or the student's spouse if married) Annual 2019 Income: _____

The student (and/or the student's spouse if married) had no income

The student is unemployed, on public assistance or receiving the following benefits:

- Temporary Assistance for Needy (TANF)
- Supplemental Nutrition Assistance Program (SNAP) or (WIC)
- Medicaid or Supplemental Security Income
- Other _____

I (Print Name), _____, attest that the above information provided is true and accurate.

Student Signature Date

Please email this income verification form to Jack Chan at jchan@bhcc.edu.