



# 2022-2023 Student Income Verification

Student Name: \_\_\_\_\_

UIN: \_\_\_\_\_

Complete sections A, B and C and upload via your Student Financial Aid Portal ([my.baker.edu/financialaidportal](http://my.baker.edu/financialaidportal)).

**A. If applicable, check and provide the annual amount of assistance you/your household received in 2020 or 2021. If any fields are left blank we will assume zero or not applicable. If you/your household received any types of assistance that are not listed on this form, explain in section B how that assistance helped to support you and your household.**

- |   |   |
|---|---|
| <input type="checkbox"/> Child Support Received in 2020: \$ _____                                   | <input type="checkbox"/> Social Security (untaxed) in 2020: \$ _____  |
| <input type="checkbox"/> TANF (Welfare) Benefits in 2020 or 2021: \$ _____                          | <input type="checkbox"/> Supplemental Social Security Insurance (SSI) in 2020 or 2021: \$ _____   |
| <input type="checkbox"/> SNAP Benefits (Food Stamps received in 2020 or 2021): \$ _____             | <input type="checkbox"/> Financial Support from another person (Example – cash, rent payment) in 2020: \$ _____                         |
| <input type="checkbox"/> Other Untaxed Income (workers' compensation, disability) in 2020: \$ _____ | <input type="checkbox"/> Veterans non-education benefits (do not include: GI Bill, Post-9/11 GI Bill, VEAP, etc.) in 2020: \$ _____     |
| <input type="checkbox"/> Section 8 Subsidized Housing in 2020 or 2021                               | <input type="checkbox"/> Housing, food and other living allowances paid to members of the military, clergy and others in 2020: \$ _____ |
| <input type="checkbox"/> WIC in 2020 or 2021  | <input type="checkbox"/> Free/Reduced Lunch in 2020 or 2021   |
| <input type="checkbox"/> Medicaid in 2020 or 2021   | <input type="checkbox"/> Student Aid Refunds  |

**B. If you did not check any of the boxes above, explain how you supported your household in 2020 (e.g. unique living situations or living with other individuals). Attach additional sheets if necessary.**

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**C. Student Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
*(Physical Signature Required)*

**Return this form and any additional required attachments securely via the Student Financial Aid Portal:**  
[my.baker.edu/financialaidportal](http://my.baker.edu/financialaidportal) or Fax: 989-729-3901.  
 Items can also be mailed: Financial Aid Processing Center, P.O. Box 77000, Owosso, MI 48867-7700.