



FINANCIAL AID DEPARTMENT
ONE COLLEGE DRIVE, BLYTHE, CA 92225
(760) 921-5500

ZERO INCOME STATEMENT 2016-2017

STUDENT NAME _____

ADDRESS _____

PHONE NUMBER _____

SOCIAL SECURITY NUMBER _____

UNDER PENALTY OF PERJURY, I STATE THAT I HAD NO INCOME OF
ANY KIND DURING THE _____ 2015 _____ YEAR.

THE ONLY MEANS OF SUPPORT I HAD WAS: _____

SIGNATURE

DATE