

2014-2015 CONFIRMATION OF SNAP BENEFITS

You or your parent indicated that you received Supplement Nutrition Assistance Program (SNAP) benefits during 2012 or 2013. The Office of Financial Aid must obtain a signed statement verifying this information. Please complete the information below and return it to the Office of Scholarships and Financial Aid. To be eligible for Federal and State aid programs, this document must be submitted prior to your last date of attendance for the academic year (2014-2015).

A. Student Information

Student First Name _____ Last Name _____ Social Security Number _____ Date of Birth _____
 Address _____ City _____ State _____ ZIP _____ () _____ Phone Number _____

B. SNAP Benefit Verification

Did you or anyone in your household* receive benefits from the Supplemental Nutrition Assistance Program (SNAP) in 2012 or 2013? (check one)

Yes No

**People in your household would include anyone you included as part of your total household when completing the FAFSA*

C. SNAP Benefit

Who in your family received the benefits? Check all that apply:

- Me, the student
- My spouse
- My parent(s)/stepparent

D. Signatures

By signing this worksheet, you certify that all the information reported on it is complete and correct. The office has the right to ask for additional documentation if further clarification is needed. Student signature is required. Parent/Spouse signature only required if parent/spouse received SNAP benefits.

Student Signature (required) _____ Date _____

Parent Signature (only required if parent/spouse received SNAP benefits) _____ Date _____

WARNING: If you purposely provide false or misleading information on this worksheet, you may be fined, sentenced to jail, or both

Submit this form to: OFFICE OF SCHOLARSHIPS & FINANCIAL AID