

STUDENT NAME	
STUDENT ID #	

2014-2015 AGENCY VERIFICATION OF RECEIPT OF FOOD STAMP BENEFITS (Calendar Years 2012 & 2013)

Federal regulations governing student financial aid mandate verification of the receipt of Food Stamp Benefits. The student (or parent if parental information was required on the FAFSA) certifies that the person listed below received benefits from the Supplemental Nutrition Assistance Program or SNAP (formerly known as the Food Stamp Program) sometime during 2012 or 2013. SNAP may be known by another name in some states. For assistance in determining the name used in a state, please call 1-800-4FED-AID (1-800-433-3243).

lame of person in the household who received benefits	:
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IF parent signature WAS REQUIRED on FAFSA DEPENDENT	If parent signature WAS NOT REQUIRED on FAFSA INDEPENDENT
 Student The parent(s) the student lived with (include stepparent) OR if not living at home, the parent(s) whose information was used on the FAFSA. Parents' other children ONLY IF: The parent listed will provide at least half of their support from July 1, 2014 to June 30, 2015, OR The children would be required to provide parent information completing the FAFSA. Other people currently living with parent(s) for whom the parent(s) currently provide and will continue to provide at least 51% of their support from July 1, 2014 to June 30, 2015. 	 Student Student's spouse (if married) Student's children ONLY IF the student will provide at least 51% of their support from July 1, 2014 to June 30, 2015. Other people currently living with the student for whom the student currently provides and will continue to provide at least 51% of their support from July 1, 2014 to June 30, 2015.

I (we) hereby certify that all information on this form is accurate and complete to the best of my (our) knowledge.		
Student Signature	Date	
Student Phone #	Email	
Parent Signature(If signature was required on FAFSA)	Date	
Parent Phone #	Email	