



2015-2016 SNAP Benefits (Food Stamp) Received Form for Parent/Stepparent

Last Name First Name Middle Name Student VIP ID

Student's Email Address Student's Telephone Number Date of Birth

We have received your 2015-2016 Free Application for Federal Student Aid (FAFSA). On your FAFSA, you indicated that at least one person in your parent(s) household received benefits from the Supplemental Nutrition Assistance Program (SNAP), formerly known as the Food Stamp Program, during 2013 or 2014. We are required to verify this information. **Please answer the question below and provide appropriate signatures.**

Did at least one person in your parent(s) household receive benefits from the SNAP (Food Stamp) program during 2013 or 2014?

- No
- Yes

Name of Person Who Received SNAP in 2013 or 2014	List Student or the Relationship to the Student

By signing this document, I certify that all the information reported on it is true and accurate. If I purposely give false or misleading information on this document, it will be cause for denial or repayment of financial aid and I may also be fined, sentenced to jail, or both.

Student's Signature

Date

Parent's Signature (required)

Date