2015-16 Verification of SNAP Benefits [ SNAP16 ]
(Formerly known as Food Stamp Program)
(V4)

Your FAFSA was selected for a review in a process called verification. This form is to verify whether or not a member of the household received SNAP benefits sometime during the calendar years of 2013 or 2014. Please check the appropriate response in either section A or section B, depending on your dependency status as reported on the FAFSA.

A. Receipt of SNAP Benefits – Independent Student (as defined by the FAFSA)

As an independent student, the student household includes:

- Student
- Student’s spouse, if married
- Student’s or spouse’s children if the student or spouse will provide more than half of their support from July 1, 2015, through June 30, 2016.
- Other people if they now live with the student and the student or spouse provides more than half of their support and will continue to provide more than half of their support through June 30, 2016.

Check the response that applies: Did you or anyone in your household receive SNAP Benefits in the calendar years of 2013 or 2014? _____ Yes _____ No

B. Receipt of SNAP Benefits – Dependent Student (as defined by the FAFSA)

As a dependent student, the student household includes:

- Student
- Your parents. Include stepparent, if the parent on the FAFSA has remarried
- Your parent’s other children, if your parents provide more than half of their support from July 1, 2015 through June 30, 2016.
- Other people if they now live with your parents and your parents provide more than half of their support and will continue to provide more than half of their support through June 30, 2016.

Check the response that applies: Did your parents or anyone in your household receive SNAP Benefits in the calendar years of 2013 or 2014? _____ Yes _____ No

C. Certification and Signatures (Parent signature required for dependent students.)

If you marked “no” to this question on the FAFSA and are marking “yes” on this form, submit documentation of the receipt of SNAP Benefits for either 2013 or 2014 to resolve the conflicting information. Each person signing this worksheet certifies that all of the information reported is complete and correct. Warning: If you purposely give false or misleading information you may be fined, be sentenced to jail, or both.

________________________________________________________________________

Student Signature ___________________ Date ________ Parent Signature ___________________ Date ________