

## Certification of Receipt for SNAP Benefits

Aid Year: \_\_\_\_\_

Your FAFSA was selected for verification of *SNAP benefits* by the Department of Education. You or your parent, depending on your dependency status, must review, complete and sign this certification and return it to the Financial Aid Office along with any other requested documents if applicable.

\_\_\_\_\_  
 Student's Name

\_\_\_\_\_  
 Student's ID

### Dependency Status

**Select One:**

- I am a dependent student - Parent must complete certification section.
- I am an independent student - You, the student, must complete certification section.

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### Certification Section

I (print name), \_\_\_\_\_, certify that a member of my household\*, received benefits from the Supplemental Nutrition Assistance Program or SNAP.

<b>*Who are the members of your household?</b>	
<b>Independent Student</b>	<b>Dependent Student</b>
<ul style="list-style-type: none"> <li>▪ You the student.</li> <li>▪ Your spouse, if you are married.</li> <li>▪ You and/or your spouse's children if you and/or your spouse will provide more than half of their support, even if the children do not live with you.</li> <li>▪ Other people if they now live with you and you and/or your spouse provide more than half of their support and will continue to provide more than half of their support.</li> </ul>	<ul style="list-style-type: none"> <li>▪ The student.</li> <li>▪ The parents (including a stepparent) even if the student doesn't live with the parents.</li> <li>▪ The parents' other children if the parents will provide more than half of their support, or if the other children would be required to provide parental information if they were completing a FAFSA. Include children who meet either of these standards even if the children do not live with the parents.</li> <li>▪ Other people if they now live with the parents and the parents provide more than half of their support and will continue to provide more than half of their support.</li> </ul>

**Note: If we have reason to believe that the information regarding the receipt of SNAP benefits is inaccurate, we may require documentation from the agency that issued the SNAP benefits.**

\_\_\_\_\_  
 Student's Signature

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Parent's Signature (if a Dependent Student)

\_\_\_\_\_  
 Date