Office of Student Financial Services
SOUTHWESTERN
ADVENTIST UNIVERSITY

Personally
Identifiable
Information

Receipt of SNAP Benefits - Independent   **2017-2018**

*Your 2017-2018 Free Application for Federal Student Aid (FAFSA) was selected for review in a process called verification. The law says that before awarding Federal Student Aid, we may ask you to confirm the information you reported on your FAFSA. To verify that you provided correct information, we will compare your FAFSA with the information on this institutional verification worksheet and with any other required documents. If there are differences, your FAFSA information may need to be corrected. You must complete and sign this worksheet, attach any required documents, and submit the form and other required documents to us. We may ask for additional information. If you have questions about verification, contact **STUDENT FINANCIAL SERVICES** as soon as possible so that your financial aid will not be delayed.*

Student Name_____ ID#_____

You, the student, certified that a member of your household received benefits from the Supplemental Nutrition Assistance Program or SNAP (formerly known as the Food Stamp Program) sometime during 2015 or 2016.

The <u>student's household</u> includes:

- The student.
- The student's spouse, if the student is married.
- The student's or spouse's children if the student or spouse will provide more than half of their support from July 1, 2017, through June 30, 2018, even if the children do not live with the student.
- 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, 2018.

☐ **The following persons received SNAP benefits in 2015 or 2016. If asked by my school, I will provide documentation of the receipt of SNAP benefit during 2015 and/or 2016.**

Name_____ Relationship_____
Name_____ Relationship_____
Name_____ Relationship_____
*If more space is needed for names and relationships, please write on back of this form.

Certification and signature(s):

I certify that all of the information reported on this worksheet is complete and correct. The student must sign this worksheet. If married, the spouse's signature is optional.

_____   _____
Student's Signature   Date

_____   _____
Spouse's Signature   Date