VERIFICATION OF SNAP BENEFITS
2015-2016 Academic Year

Student Name: ___________________________ ID #: ____________________

You have been selected for verification of SNAP (food stamps) by the Department of Education. Please verify whether or not you, or someone in your household, received SNAP benefits in 2013 or 2014.

Please select one option:

☐ I or someone in my household received SNAP benefits in 2013 or 2014.

☐ No one in my household received SNAP benefits in 2013 or 2014.

By selecting the first option, the student and/or parent(s) certify that a member of the household received benefits from the Supplemental Nutrition Assistance Program or SNAP (formerly known as the Food Stamp Program) during 2013 or 2014.

Please 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 in 2013 or 2014.

Student Signature: ___________________________ Date: ________________

Parent Signature: ___________________________ Date: ________________

(If dependent, one parent must sign)