



# 2016–2017 Verification of SNAP Benefits Independent Student

Your 2016–2017 Free Application for Federal Student Aid (FAFSA) was selected for review in a process called verification. The law requires that before awarding Federal Student Aid, we 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 form and with any other required documents. If there are differences, your FAFSA information may need to be corrected. You must complete and sign this form, attach any required documents and submit to the Financial Aid Office within 30 days of this request. We may ask for additional information. If you have questions about verification, contact the Financial Aid Office as soon as possible so that your financial aid will not be delayed. Your financial aid eligibility cannot be determined, and financial aid will not be awarded or disbursed, until the verification process is complete.

### A. Student’s Information

_____	_____	_____	_____
Student’s Last Name	Student’s First Name	Student’s M.I.	Student’s Social Security Number
_____			_____
Student’s Street Address (include apt. no.)			Student’s Date of Birth
_____	_____	_____	_____
City	State	Zip Code	Student’s Phone Number

### B. Verification of Supplemental Nutrition Assistance Program (SNAP) Benefits

**Please check the appropriate box below** regarding the receipt of benefits from the Supplemental Nutrition Assistance Program or SNAP (formerly known as the Food Stamp Program) by a member of your household\* sometime during 2014 or 2015. SNAP may be known by another name in some states. In Michigan, the program is referred to as MI Bridges or Michigan Bridge Card. For assistance in determining the name used in a state, please call 1-800-4FED-AID (1-800-433-3243).

- A member of my household\* received SNAP benefits in 2014 or 2015.
- SNAP benefits were not received by any member of my household\* in 2014 or 2015.

\*The student’s household 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, 2016 through June 30, 2017, 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 the other people’s support and will continue to provide more than half of their support through June 30, 2017.

**We will notify you if additional documentation is required to verify your SNAP benefits.**

### C. Certification and Signature

Each person signing below certifies that all of the information reported is complete and correct.

**WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, sent to prison, or both.**

_____	_____
Student’s Signature (Required)	Date
_____	_____
Spouse’s Signature (Optional)	Date