RECEIPT OF SNAP BENEFITS
VERIFICATION WORKSHEET
2013-2014

ID # A

Name ____________________________

(Last Name) (First Name) (MI)

Your 2013-2014 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, the financial aid administrator at your school will compare your FAFSA with the information on this 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 the financial aid administrator at your school. Your school may ask for additional information. If you have questions about verification, contact your financial aid administrator as soon as possible so that your financial aid will not be delayed.

☐ My household did not receive any SNAP benefits in 2012.

One of the members of the household listed below received benefits from the Supplemental Nutrition Assistance Program or SNAP (formerly known as the Food Stamp Program) sometime during 2013 or 2014.

The Independent 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, 2013, through June 30, 2014, 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, 2014.

The Dependent student’s household includes:
• The student.
• The parents (including a stepparent) even if the student doesn’t live with the parents.
• The parents’ other children, if the parents will provide more than half of their support from July 1, 2013, through June 30, 2014, or if the other children would be required to provide parental information if they were completing a FAFSA for 2013-2014. Include children who meet either of these standards even if the children do not live with the parents.
• 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 through June 30, 2014.

<table>
<thead>
<tr>
<th>Full Name</th>
<th>Age</th>
<th>Relationship</th>
</tr>
</thead>
<tbody>
<tr>
<td>Marty Jones (example)</td>
<td>28</td>
<td>Self</td>
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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 2012 or 2013.

STATEMENT OF EDUCATIONAL PURPOSE

I certify that I, ________________________________________, am the individual signing this Statement of Educational Purpose and that the federal student financial assistance I may receive will only be used for educational purposes and to pay the cost of attending St. Louis Community College for 2013-2014.

Student Signature ____________________________ Date ____________

Student ID Number ____________________________

Parent Signature ____________________________ Date ________

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