

2016-2017 VERIFICATION OF FOOD STAMPS (SNAP)

Your 2016-2017 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 must ask you to confirm the information you and your parents reported on your FAFSA. To verify that you provided correct information, we 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 and at least one parent (if dependent) must complete and sign this worksheet, attach any required documents, and submit the form and other required documents to the Ursuline College Office of Financial Aid. We may ask for additional information after this has been submitted. If you have questions about verification, contact us as soon as possible so that your financial aid will not be delayed.

STUDENT INFORMATION – Please print clearly

<i>Last Name</i>	<i>First Name</i>	<i>Student ID Number or Social Security Number</i>	
<i>Permanent Address</i>	<i>Street & Number</i>	<i>City/State/Zip</i>	<i>Date of Birth</i>
<i>Cell Phone Number (Include Area Code)</i>		<i>Permanent Phone Number (Include Area Code)</i>	

The information requested on this document pertains to those who will be part of your household from July 1, 2016 to June 30, 2017.

If you are a **dependent student**, include:

- Yourself
- Your parent(s) (including step-parents)
- Your parent(s) other dependent children if a) your parent(s) will provide more than half of their support from July 1, 2016 through June 30, 2017, or b) the children would be required to provide parental information when applying for Federal Student Aid. Include children who meet either of these standards even if the children do not live with the parents.
- Other people only if they now live in your parent household and your parents will provide more than half of their support from July 1, 2016 through June 30, 2017

If you are an **independent student**, include:

- Yourself
- Your spouse (if you are married)
- Your children if you will provide more than half of their support from July 1, 2016 through June 30, 2017, even if the children do not live with you
- Other people only if they live in your household and you provide more than half of their support and will continue to do so from July 1, 2016 through June 30, 2017

FOOD STAMP BENEFITS (SNAP) – CALENDAR YEARS 2014 or 2015

Did you or someone in your household as defined above receive food stamps (SNAP) during the calendar year 2014 or 2015?

_____ **YES...** Complete name(s) of recipient(s) below and then continue to the certification below. 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 2014 or 2015.

Name(s) of Recipient(s): _____

_____ **NO.....** Continue to the certification below.

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

<i>Student Signature</i>	<i>Date</i>	<i>Student ID Number</i>
<i>Parent Signature (If student is dependent)</i> <i>Student Spouse Signature (Optional - If Student is married)</i>	<i>Date</i>	<i>Parent/Spouse Name (Please Print)</i>

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

Office of Financial Aid