SNAP Benefits 2016-2017

Student’s ID Number: ___________________________ Email: ___________________________

Student’s Name: ___________________________ Cell Phone #: ___________________________

Dependent Student

In 2014 or 2015 did you, your parents, or anyone in your parent’s household who received more than 50% support from your parents, receive food stamps/SNAP Benefits?

Yes: _____  No: _____

Independent Student

In 2014 or 2015 did you, your spouse (if applicable), or anyone in your household who received more than 50% support from you or your spouse, receive food stamps/SNAP Benefits?

If you purposely give false or misleading information on this worksheet, you may receive a fine, a prison sentence, or both.

By signing this information request, I certify that all information is complete and correct.

Student’s Signature: ___________________________ Date: ___________________________

Parent’s Signature: ___________________________ Date: ___________________________

Form 213