

COLLEGE OF THE OUACHITAS

Financial Aid Office, One College Circle, Malvern, AR 72104
Phone (501) 337-5000 Fax (501)337-9382

2016-2017 Verification of S.N.A.P. Benefits

Student Name: _____ College ID/SSN: _____

The FAFSA you submitted indicates that you or someone in your household (your parents' household if you are a dependent) received food stamps/SNAP benefits during the 2014 or 2015.

Did you or any member of your household (your parent's household if you are a dependent student) receive food stamps/SNAP benefits at any time during the 2014 or 2015 year?

___ Yes - complete the chart below

___ No - sign and return to the Financial Aid Office

Casehead receiving benefits	Amount received in 2014	Amount received in 2015

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.

I certify that the above information is true and correct to the best of my knowledge. I understand that if improperly completed, I may have to resubmit this or a new form with necessary corrections. I understand that purposely providing false or misleading information on this form may result in a denial or repayment of financial aid and possible federal prosecution.

STUDENT SIGNATURE

DATE

PARENT SIGNATURE (if dependent)

DATE

INDEPENDENT STUDENT HOUSEHOLD:

- Yourself.
- Your spouse, if married.
- Your children, if any, if you will provide more than half of their support from July 1, 2016, through June 30, 2017, or if the child would be required to provide your information if they were completing a FAFSA for 2016-2017. Include children who meet either of these standards, even if they do not live with you.
- Other people if they now live with you and you provide more than half of their support and will continue to provide more than half of their support through June 30, 2017.
- Yourself and your parent(s) (including stepparent) even if you do not live with your parent(s).
- Your parent(s)' other children if your parent(s) will provide more than half of their support from July 1, 2016, through June 30, 2017, or if the other children would be required to provide parental information if they were completing a FAFSA for 2016-2017. Include children who meet either of these standards, even if they do not live with your parents(s).
- Other people if they now live with your parent(s) and your parent(s) provide more than half of their support and will continue to provide more than half of their support through June 30, 2017.