

## 2016-2017 Verification of SNAP Food Benefits

On the 2016–2017 Free Application for Federal Student Aid (FAFSA) you indicated that you or someone in your household received benefits from the Supplemental Nutrition Assistance Program or SNAP (formerly known as the Food Stamp Program) sometime during 2014 or 2015. Federal Regulations require that the Office of Student Financial Assistance verify the benefits received.

Name (Last, First, MI)	Harper ID Number		
Street Address	City	State	ZIP
Email Address	Student's Date of Birth	Contact Telephone Number	

**Please complete the table below listing the members included in your parents' household, their relationship to you, and indicate Yes or No if they received SNAP benefits sometime during 2014 or 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.

### The parents' household includes:

- The student, even if the student doesn't live with the parent(s).
- The parent(s) (including a stepparent).
- The parent(s)' other children if the parent(s) will provide more than half of the child's support between July 1, 2016 and June 30, 2017, or if the other children would be dependent and thus 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 a child does not live with the parent(s).
- Other people if they now live with the parent(s) and the parent(s) provide more than half of the other person's support and will continue to provide more than half of their support between July 1, 2016 and June 30, 2017.

Full Name	Relationship to You	Received Benefits	
1. (Your Name)	Self	<input type="checkbox"/> Yes	<input type="checkbox"/> No
2.		<input type="checkbox"/> Yes	<input type="checkbox"/> No
3.		<input type="checkbox"/> Yes	<input type="checkbox"/> No
4.		<input type="checkbox"/> Yes	<input type="checkbox"/> No
5.		<input type="checkbox"/> Yes	<input type="checkbox"/> No

### Certification and Signatures

Each person signing this worksheet certifies that all of the information reported on it is complete and correct.

\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent's Signature

\_\_\_\_\_  
Date

Please return this completed form and all other required materials to:

**One Stop  
Building A, Room A250  
Harper College  
1200 West Algonquin Road  
Palatine, IL 60067  
Fax 847.925.6928  
onestop@harpercollege.edu**

**WARNING:** If you purposely give false or misleading information, you may be fined, be sentenced to prison, or both.