

2015-2016 Verification of SNAP Benefits (Food Stamp Assistance Program)

Last Name	First Name	CSU ID Number	
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Email Address	Phone Number (home)	Phone Number (cell)	

On the Free Application for Federal Student Aid (FAFSA), you indicated that you or a member of your household received Food Stamps during either 2013 and/or 2014. You have been selected for verification; therefore, the Financial Aid Office must verify the receipt of these benefits. Please complete this form in its entirety.

Did you or a member of your household receive Food Stamps in 2013 and/or 2014?

□ No. Please sign and return this form to Campus411, All-in-1. We will update your FAFSA to correct this information.

Name of Recipient		Relationship to student		
Street Address		Phone Number		
City	State	Zip	County	
this form. Acceptable proof of beA. Food Assistance Approval LetB. For OHIO residents only: Atta	ter and/or	-		

By signing this document, you certify that the information reported is complete and correct.

Student's Signature

Date

Parent's Signature (If Parent information was required on FAFSA)