



Verification of Supplemental Nutrition Assistance Program (SNAP)

Independent

2014-2015

To receive Federal Financial Aid you are required to verify the information you reported on your application for student financial aid. Please read the instructions and answer all the questions carefully. Return this form to: Salisbury University, 1101 Camden Avenue, Financial Aid Office, Salisbury, MD 21801.

A. Student Information

(Please Print)

Student Name _____

Birth Date

Address _____

Phone #

SU ID #

B. Student/Spouse Information

- 1. ___ I/my spouse did not receive Supplemental Nutrition Assistance Program (SNAP) in 2012 or 2013.
2. ___ I/my spouse did receive Supplemental Nutrition Assistance Program (SNAP) in 2012 or 2013. You are required to attach documentation from the agency that issues the benefit.

C. Sign this Worksheet

By signing this worksheet, we certify that all of the information reported on this worksheet is complete and correct. WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.

Student signature _____ Date _____

Spouse signature _____ Date _____