**2016-2017 Independent – SNAP Verification Worksheet**

Your 2016-2017 Free Application for Federal Student Aid (FAFSA) was selected for review in a process called verification. The law says that before awarding Federal Student Aid, we may ask you to confirm the information you and your spouse reported on the FAFSA. To verify that you provided correct information the financial aid administrator at your school will compare your FAFSA with the information on this worksheet and with any other required documents. If there are any differences, your FAFSA information may need to be corrected. Please see signatures requirements at the end of the form, attach any required documents and submit to your financial aid administrator at your school. If you have any questions, contact your financial aid administrator as soon as possible so that your financial aid will not be delayed.

***INSTRUCTIONS: Complete all sections of this form, sign and return to Mitchell College.***

**Section 1: STUDENT’S INFORMATION**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 **Last Name First Name M.I. Social Security Number**

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**Date of Birth Student’s Telephone Number (include area code)**

**Section 2: SNAP (SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM), formerly known as Food Stamps:**

1. **In 2014 or 2015, did ANYONE in your household receive Supplemental Nutrition Assistance Program (SNAP) benefits? Yes \_\_\_\_\_ No \_\_\_\_ (skip “B” and go to section 3)**
2. **The student certifies that \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, a member of the student’s household, received benefits from the Supplemental Nutrition Assistance Program (SNAP) sometime during 2014 or 2015. SNAP may be known by another name in some states. For assistance in determining the name used in a state, please call 1-800-433-3243.**

***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 student(s)’ household includes:**

* **The student.**
* **The student’s spouse, if the student is married.**
* **The student’s or spouse’s children, if any, if the student or spouse will provide more than half of the children’s support from July 1, 2016, through June 30, 2017, even if the children do not live with the student.**
* **Other people if they NOW live with the student AND the student or spouse provides more than half of the other people’s support and will continue to provide more than half of their support through June 30, 2017.**

**Section 3: CERTIFICATION AND SIGNATURES:**

Each person signing below certifies that all the information reported is complete and correct***.***

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**Student’s Signature (Required) Date**

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**Spouse’s Signature (optional) Date**

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