2015-16 SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM/ SNAP (FOOD STAMPS) CERTIFICATION STATEMENT

STUDENT: ___________________________________________  STUDENT ID#: __________________

Please re-write the statement in the box on the lines provided below, and sign this form.

Please be aware that by doing so, you are certifying that you or a member of your household received SNAP (formerly known as Food Stamps) benefits for the years 2013 or 2014.

I certify that I, [Print Student’s Name], or a member of my household, received SNAP (formerly known as Food Stamps) Assistance during the year 2013 or 2014.

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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 (Required for Dependent Students)  Date

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