If you have any questions or are unsure of any item on this worksheet, PLEASE CALL US!
Phone (208) 496-1600  Fax (208) 496-6711 or (208) 496-1603
Email address: faverification@byui.edu

SNAP Verification Worksheet  2014-2015

Student Name: ____________________________  I-Number: __________________________

Phone Number where you can be reached: ____________________________________

When you completed your 2014-15 FAFSA, you indicated that someone in your household received benefits from the Supplemental Nutrition Assistance Program or SNAP (formerly known as food stamps) during 2013 and/or 2014.

Please mark one of the following:

☐ One of the persons listed in my household received SNAP benefits in 2013 or 2014. If asked by the school, I will provide documentation of the receipt of SNAP benefits in 2013 or 2014.

☐ No one in my household received SNAP benefits in 2013 or 2014. That information was incorrectly reported on my 2014-15 FAFSA.

CERTIFICATION

Each person signing this worksheet certifies that all of the information reported on it is complete and correct. The student and one parent (if a dependent student) must sign and date.

Student’s Signature: ____________________________ Date: __________________

Parent’s Signature: ____________________________ Date: __________________
(if dependent student)

If I/we purposely give false or misleading information on this worksheet, I/we may be fined, be sentenced to jail, or both.