

Office of Financial Aid

2017-2018 SNAP Benefits and Child Support Paid Verification Form

The purpose of this form is to verify your Supplemental Nutrition Assistance Program Benefits (SNAP) and Child Support Paid. Please complete and return this form to the Financial Aid Office by US Mail, Fax, or Email.

Student Information

Last Name		First Name	М.І.	Messiah College Student ID
Date of Birth	Home Phone Number	Student	's E-mail	Parent's E-mail

Supplemental Nutrition Assistance Program Benefits (SNAP)

Did the student or parent receive SNAP benefits (food stamps) during the calendar year 2015 or 2016?

- Yes.
- □ No.

Child Support Paid

Did the student or parent pay child support during the calendar year 2015?

- **Yes.** Complete the table below.
- **No.** Proceed to signature section.

Dependent Student: Enter information about child support your parents paid during calendar year 2015? **Independent Student:** Enter information about child support you paid during the calendar year 2015?

Name of Person Who Paid Child	Name of Person to Whom Child Support	Name of Child for Whom Support Was	Age of Child for Whom Support	Amount of Child Support Paid in 2015
Support	was Paid	Paid	Was Paid	
				\$.00
				\$.00
				\$.00
				\$.00
			Total Paid:	\$.00

Sign This Form

Each person signing this form certifies that all the information reported on this form is complete and correct. **Dependent Student**: Student and one parent must sign. **Independent Student**: If married, spouse's signature is optional.

Note: If we have reason to believe that the information regarding the receipt of SNAP benefits or child support paid is inaccurate, we may require documentation from the agency that issued the SNAP benefits in 2015 or 2016 and/or child support paid documents from 2015.

Student's Signature

Date

Parent's Signature or Spouse's Signature

Date