**Student's Name _____ Adelphi ID# _____**

---

# 2014-2015
# Receipt of SNAP Benefits
# Dependent Student

The parents certify that _____, a member of the parents' household, received benefits from the Supplemental Nutrition Assistance Program or SNAP (formerly known as the Food Stamp Program) sometime during 2012 or 2013. SNAP may be known by another name in some states. For assistance in determining the name used in a state, please call 1-800-4-FED-AID (1-800-433-3243).

Members of the parents' household include:

- The student.
- The parents (including a stepparent) even if the student doesn't live with the parents.
- The parents' other children if the parents will provide more than half of that child's support from July 1, 2014, through June 30, 2015, or if that child would be required to provide parental information if they were completing a FAFSA for 2014–2015. Include children who meet either of these standards even if the child does not live with the parents.
- Other people if they now live with the parents and the parents provide more than half of that other person's support and will continue to provide more than half of their support through June 30, 2015.

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 2012 or 2013.

## Certification and Signatures

Each person signing this worksheet certifies that all of the information on it is complete and correct. Electronic corrections to your FAFSA may be made by our office if there are discrepancies between the information on this form and the data you filed on your FAFSA. The student and one parent must sign and date this form

**Student's Signature**_____ **Date**_____

**Parent's Signature** _____ **Date**_____

**V E**