



## Verification Food Stamp Benefits (SNAP)

Student's Name: \_\_\_\_\_

WES ID: \_\_\_\_\_ Class: \_\_\_\_\_

Your file has been selected for verification by the U.S. Department of Education and Food Stamp Benefits (SNAP) is required to be verified.

### FOOD STAMP BENEFITS (SNAP) – sometime during 2014 or 2015

Were you or members of your household eligible to receive food stamps sometime during 2014 or 2015?

\_\_\_\_ YES.

\_\_\_\_ NO.

**CERTIFICATION:** By signing this worksheet, I certify all the information reported is complete and correct:

<i>Student Signature</i>	<i>Date</i>	<i>Student Name (Please Print)</i>	<i>Wesleyan ID Number</i>
<i>Parent Signature (IF student is dependent) / Spouse Signature (IF Student is married)</i>	<i>Date</i>	<i>Parent/Spouse Name (Please print)</i>	