Supplemental Nutrition Assistance Program (SNAP) Verification Form

You or your parent indicated that you received SNAP benefits (Food Stamps) during 2015 on your FAFSA Application. The Office of Financial Aid must obtain a signed statement verifying this information. Please complete the information below and return it to the Office of Financial Aid.

_________________________  ___________________________  ________________________
Student Last Name                  Student First Name           Loyola University ID Number

☐ I, the student, received SNAP benefits between January 1, 2015 and December 31, 2015.

☐ My parent(s)/spouse received SNAP benefits between January 1, 2015 and December 31, 2015.

By signing this document, you certify that the information reported is complete and correct. If it appears that information on this form is inaccurate, you may be required to submit documentation from the providing agency verifying the benefit and amount received.

If you have any questions about the Verification process or with the completion of this form, please contact the Office of Financial Aid at 410-617-2576 or financialaid@loyola.edu.

Each person signing this worksheet certifies that all of the information reported on it is complete and correct. The student signature is required. A parent or spouse is required to sign if indicated above that they received the benefit.

_________________________  ___________________________
Student’s Signature                      Date

(ITEM REQUIRED)

_________________________  ___________________________
Parent/Spouse’s Signature              Date

Submit this worksheet and all documentation to:
Loyola University Maryland * Office of Financial Aid
4501 N. Charles Street * Baltimore, MD 21210
Fax: (410) 617-5149 * Phone (410) 617-2576
Email: financialaid@loyola.edu

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