COE COLLEGE 2016-2017
Receipt of SNAP Benefits
Dependent Student

You are receiving this form because you reported on your FAFSA that a member of your parents’ household received benefits from the Supplemental Nutrition Assistance Program or SNAP (formerly known as the Food Stamp Program).

Student’s Last Name      Student’s First Name      Student’s Coe ID Number (if known)

I, the parent, certify that a member of my household received benefits from the Supplemental Nutrition Assistance Program or SNAP (formerly known as the Food Stamp Program) sometime during 2014 or 2015. SNAP may be known by another name in some states. For assistance in determining the name used in a state, please call 1.200.4FED.AID (1.800.433.3243).

The parents’ household should include:

- The student.
- The parent(s) - including a step-parent, even if the student doesn’t live with the parent(s).
- The parents’ other children if the parent(s) will provide more than half of their support from July 1, 2016, through June 30, 2017, or if the other children would be required to provide parental information if they were completing a FAFSA for 2016–2017. Include children who meet either of these standards even if the children do not live with the parent(s).
- Other people if they now live with your parent(s) and your parent(s) provide more than half of their support and will continue to provide more than half of their support through June 30, 2017.

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 2014 or 2015.

Student and Parent(s) Certification and Signatures
Each person signing below certifies that all of the information reported is complete and correct.
The student and one parent whose information was reported on the FAFSA must sign and date.

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

Parent’s Printed Name               Parent’s Signature               Date

Student’s Signature               Date

Return this form by mail or fax to:
Coe College Office of Financial Aid, 1220 First Ave NE, Cedar Rapids, IA 52402 Fax Number: 319.399.8886