MT. SAN ANTONIO COLLEGE FINANCIAL AID OFFICE

RETURN TO: Mt. San Antonio College Financial Aid Office 1100 N. Grand Avenue Walnut, CA 91789

Date



2015-16 RECEIPT OF SNAP BENEFITS (DEPENDENT STUDENT)

	Check here to 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 2013 or 2014. SNAP may be known by another name in some states. For assistance in determining the name used in a state, please call 1-800-4FED-AID (1-800-433-3243).	
	Check here to certify that in 2013 or 2014 <u>no</u> member of your parent(s) household, as reported on the FAFSA, received benefits from the Supplemental Nutrition Assistance Program (SNAP)/ Food Stamps program.	
The <u>par</u>	rents' household includes:	
 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 their support from July 1, 2015, through June 30, 2016, or if the other children would be required to provide parental information if they were completing a FAFSA for 2015–2016. Include children who meet either of these standards even if the children do not live with the parents. Other people if they now live with the parents and the parents provide more than half of their support and will continue to provide more than half of their support through June 30, 2016. 		
	f we have reason to believe that the information regarding the chation from the agency that issued the SNAP benefits in 20	
Certific	ations and Signatures	
reporte	erson signing below certifies that all of the information d is complete and correct. The student and one parent 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.
Print St	udent's Name	Student's ID Number
Studen	t's Signature	Date

Parent's Signature