Governors State UNIVERSITY

Office of Financial Aid
www.govst.edu/finaid
708.534.4480
Fax: 708.534.1172

2014-2015SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM FORM

Your 2013-2014 Free Application for Federal Student Aid (FAFSA) was selected for review in a process called verification. The law says that before awarding Federal Student Aid, we may ask you to confirm the information you and your spouse (if applicable) reported on your FAFSA. To verify that you provided correct information GSU will compare your FAFSA with the information on this worksheet and with any other required documents. If there are differences, your FAFSA information may need to be corrected. You must complete and sign this worksheet, attach any required documents, and submit the form and other required documents to the financial aid administrator at GSU. We may need to ask for additional information in the future. If you have questions about verification, contact our office as soon as possible so that your financial aid will not be delayed.

STEP 1: STUDENT INFORMATION

Please complete this verification form and provide copies of all requested paperwork within **15 days** of receipt to Governors State University. Incomplete paperwork will not be accepted, thereby delaying the processing of your financial aid award.

Student Name: _____ GSU ID #_____ Last 4 digits of SS#:_____
Please Print Last First

Permanent Home Address: _____
City State Zip Code

Student's Date of Birth: _____Home Phone #: _____Cell #: _____

Email Address: _____

STEP 2: FOOD STAMP BENEFITS – CALENDAR YEAR 2012 AND/OR 2013

Complete this section if someone in the student's household received benefits from the Supplemental Nutrition Assistance Program or SNAP (formerly known as food stamps) any time during the 2012 and/or 2013 calendar year.

- ☐ I and/or my spouse (if married) received Supplemental Nutrition Assistance Program (Food Stamps) benefits during the 2012 and/or 2013 calendar years. I have provided documentation of the receipt of benefits during the 2012 and/or 2013.
- ☐ My parent(s)/stepparent received Supplemental Nutrition Assistance Program (Food Stamps) benefits during the 2012 and/or 2013 calendar years. I have provided documentation of the receipt of benefits during the 2012 and/or 2013 calendar years.
- ☐ No one in our household received Supplemental Nutrition Assistance Program (Food Stamps) benefits in 2012 or 2013.

STEP 3: CERTIFICATION AND SIGNATURES

Each person signing this worksheet certifies that all of the information reported on it is complete and correct. The student must sign and date this worksheet. If married, the spouse's signature is optional.

_____
Student's Signature Date

_____
Parent Signature (Required for dependent Students). Date

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

CRI CODE: FAC14SNP – PARENT FAC14SNS STUDENT V2