On your 2016-2017 FAFSA you reported that you or someone in your household received benefits from the Supplemental Nutrition Assistance Program (SNAP) in 2014 or 2015. We are required by the Department of Education to verify this information.

☐ Yes, one of the persons in my household received SNAP (formerly known as food stamps) in 2014 or 2015. If asked, I will provide documentation of the receipt of SNAP benefits.

☐ No, none of the persons in my household received SNAP benefits.

Each person signing below certifies that the information reported on this form is complete and correct. I understand that if I purposely give false or misleading information, I may be fined, sentenced to prison, or both. Clarkson College must review the requested information, under the financial aid program rules (CFR Title 34, Part 668).

__________________________________________
Student Name (Please print)

__________________________________________  _____________
Student signature          Date

__________________________________________  _____________
Parent signature (If applicable)          Date