



2016–2017

SNAP Verification *Independent Student*

Student Financial Services • 1 Ferncroft Road • Danvers, MA 01923-0840

978-762-4189 or 781-477-2191

www.northshore.edu/financial-services

sfs@northshore.edu

Required (please print)	SNAPI								
Student ID# <table border="1" style="width: 100%; text-align: center;"> <tr> <td style="width: 20px;">N</td> <td style="width: 20px;">0</td> <td style="width: 20px;">0</td> <td style="width: 20px;"> </td> <td style="width: 20px;"> </td> <td style="width: 20px;"> </td> <td style="width: 20px;"> </td> <td style="width: 20px;"> </td> </tr> </table> Last Name: _____ First Name: _____	N	0	0						<p><i>Your 2016–2017 Free Application for Federal Student Aid (FAFSA) was selected for review in a process called verification. You are required to complete this form if someone in your household received benefits from the Supplemental Nutrition Assistance Program or SNAP (known as food stamps) any time during the 2014 or 2015 calendar years. The law says that before awarding Federal Student Aid, we may ask you to confirm the information you reported on your FAFSA and make any necessary changes.</i></p>
N	0	0							

The following person(s) in the student’s household received SNAP benefits in 2014 or 2015:

Note: If the Student Financial Services Office at North Shore Community College has reason to believe that the information regarding the receipt of SNAP benefits is inaccurate, the institution may require documentation from the agency that issued SNAP benefits in 2014 or 2015.

Certification and Signatures

Each person signing this form certifies that all of the information reported is complete and correct.
We cannot accept digital signatures.

STUDENT’S SIGNATURE

DATE

SPOUSE’S SIGNATURE (OPTIONAL)

DATE

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