On your Free Application for Federal Student Aid (FAFSA), you indicated that you or a member(s) of your household received Food Stamps or participated in the Supplemental Nutrition Assistance Program (SNAP) during the 2013 or 2014 calendar years (January 1, 2013 – December 31, 2014). As part of the verification process, we need to confirm that you received this benefit. This form must be completed and returned to the Financial Aid Office within (10) business days. We cannot continue processing your request for financial aid until this information is received. If you have any questions, contact the office at financialaid@easternct.edu or by calling (860) 465-5205. A member of the client services staff will assist you.

Student: ____________________________________________

Student’s Printed Name

Student Signature

Date

Eastern ID: ______________________________

Printed Parent Name (Required for Dependent Student)

Parent Signature (Required for Dependent Student)

Date

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 2013 or 2014.

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

CAUTION: If you have been told that you should not apply for SNAP benefits, you must sign in the appropriate box and sign this worksheet.

Please check the box that applies:

☐ I (the student) or my spouse (if married) received Food Stamps or participated in the Supplemental Nutrition Assistance Program (SNAP) during the 2013 or 2014 calendar years from January 1, 2012 – December 31, 2013.

☐ My Parent(s) received Food Stamps or participated in the Supplemental Nutrition Assistance Program (SNAP) during the 2013 or 2014 calendar years from January 1, 2013 – December 31, 2014 (Dependent students only).

☐ Neither I, my spouse (if married), nor my parents’ (if you’re a dependent student) received Food Stamps or participated in the Supplemental Nutrition Assistance Program (SNAP) during the 2013 or 2014 calendar years from January 1, 2013 – December 31, 2014.

Sign this Worksheet

Certification and Signatures

Each person signing this worksheet certifies that all of the information reported on it is complete and correct. The student and one parent 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.