SNAP Benefits (Food Stamps) Received 2016–2017

Your 2016–2017 Free Application for Federal Student Aid (FAFSA) was selected for review in a process called verification. You indicated on FAFSA that a member of your household received SNAP benefits/Food Stamps during the 2014 and/or 2015 calendar year(s). We must verify this information before awarding Federal Student Aid. In this process, Office of Student Financial Aid Services will compare your FAFSA with the information provided on this worksheet and with any other required documents. If there are differences, your FAFSA information may need to be corrected. You and at least one parent must complete and sign/date this worksheet and submit to the Office of Student Financial Aid Services.

STUDENT INFORMATION

Last Name                       First Name                     M.I.                    NJIT ID

Phone Number                                                                                   NJIT Email

STATEMENT OF SNAP (FOOD STAMPS) BENEFITS RECEIVED

Did you or any member of your household receive Supplemental Nutrition Assistance Program (SNAP) benefits/food stamps in 2014 or 2015?

☐ No

☐ Yes If yes, please provide the information below. We may request additional documentation of the receipt of benefits.

<table>
<thead>
<tr>
<th>Name of Person Who Received SNAP Benefits</th>
<th>Relationship to Student</th>
</tr>
</thead>
<tbody>
<tr>
<td>Missy Jones (example)</td>
<td>Mother (example)</td>
</tr>
</tbody>
</table>

CERTIFICATION AND SIGNATURES

By signing this worksheet, I (we) certify that all of the information reported on this worksheet is complete and correct. If the student is a dependent, at least one parent must sign. Warning: If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to prison, or both. Computer generated signatures are not acceptable.

Student Signature ___________________________ Date ___________________________

Parent Signature (Required for Dependent Students) ___________________________ Date ___________________________

Upload Completed Form/Documents to: https://mappingyourfuture.org/MappingXpress/NJITFA/

Mail or Fax:
Student Financial Aid Services
NJIT - Student Mall, University Heights
Newark, NJ 07102 Fax: 973-596-6471