

SNAP **Supplemental Nutrition Assistance**

Your application was selected for review in a process called "Verification."

In this process, UAHuntsville will be comparing information reported on your FAFSA application to the required documents submitted. The Dept of Education requires that we verify this information before awarding federal financial aid. If there are differences between your application information and your financial documents, our office will make an electronic correction on your FAFSA application.

Submit supporting documents as soon as possible. Any delay will not allow the verification to be processed in a timely manner.

UAHuntsville, Office of Student Financial Services 301 Sparkman Drive, UC 212, Huntsville, Alabama 35899
Phone (256) 824-6650 Fax (256) 824-6212 financialaid@uah.edu

STUDENT INFORMATION: PLEASE PRINT UAHuntsville Student # or Social Security # _____

Last Name First Name MI Date of Birth

Permanent Address (include APT #) City State Zip Code

Email address

Currently enrolled students are contacted via their UAHuntsville email.

New students are initially contacted via the FAFSA email. Once the term begins, only the UAHuntsville email is used.

Dependent Student Household Definition

- The student.
- The parents, including stepparent, even if the student does not live with the parents.
- The parents' other children, and other individuals IF they now live with the parents AND IF the parents will provide more than half of their support from July 1, 2013 through June 30, 2014. Include other children who are required to provide parental information if they are completing a 2013-14 FAFSA. Include children who meet these standards even if the children do not live with the parents.
- Do not include children for whom child support is paid by either parent.

I certify that a member of my household received benefits from the Supplemental Nutrition Assistance Program or SNAP (formerly know as the Food Stamp Program) sometime during 2011 or 2012. SNAP may be known by another name in some states. For assistance in determining the name used in a state, please call 1-800-4FEDAID.

Yes ____ No ____

Student Signature

Parent signature

WARNING:

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

Additional documentation may be requested at the discretion of the Office of Student Financial Services.