



2014-2015 Independent SNAP Foodstamp Form

RETURN TO:

San Bernardino Valley College
Financial Aid Office – AD/SS 106
701 S. Mt. Vernon Ave.
San Bernardino, CA 92410

Name of Financial Aid Applicant *(Please Print)*

Last First Middle
Date of Birth: Month Day Year

Student ID#: Social Sec#

A. Independent Student Family Information

List below the people in your household. Please include:

- Yourself or your spouse, if you are married.
- Your children, if any, if you will provide more than half of their support from July 1, 2014, through June 30, 2015, or if the child would be required to provide your information if they were completing a FAFSA for 2014–2015. Include children who meet either of these standards, even if they do not live with you.
- Other people if they now live with you and you provide more than half of their support and will continue to provide more than half of their support through June 30, 2015.

Include the name of the college for any household member who will be enrolled at least half time, in a degree, diploma, or certificate program at a postsecondary educational institution any time between July 1, 2014, and June 30, 2015.

If more space is needed, attach a separate page with your name and Student ID# at the top.

Full Name	Age	Relationship	College	Will be Enrolled at Least Half Time
<i>Marty Jones(example)</i>	28	<i>Wife</i>	<i>Central University</i>	<i>Yes</i>
		<i>Self</i>		

B. Independent Student's Other Information to Be Verified

Complete this section if someone in the student's household (listed in Section A) received benefits from the Supplemental Nutrition Assistance Program or SNAP (formerly known as food stamps) any time during the 2012 or 2013 calendar years.

- ☐ One of the persons listed in Section A of this form received SNAP benefits in 2012 or 2013. If asked by my school, I will provide documentation of the receipt of SNAP benefits during 2012 and/or 2013.

C. Certification and Signature

I certify that all of the information reported on this form is complete and correct. The student must sign this form.
If married, the spouse's signature is optional.

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

Student's Signature

Date

Spouse's Signature

Date

****DO NOT MAIL THIS FORM TO DEPT OF EDUCATION – PLEASE SEND TO THE SBVC FINANCIAL AID OFFICE.****

ISFF (2014-2015) ms