



2016-2017 SNAP Verification Worksheet

**** Please complete in black or blue ink only! ****

_____ Student's Name		
_____ Student's Address (including apt #)		
_____ City	_____ State	_____ Zip Code
_____ Student's Home Phone (include area code)		

_____ H HGTC ID or Social Security Number
_____ Student's Date of Birth
_____ E-mail
_____ Cell Phone (include area code)

Did you or a member of your household receive Food Stamps in 2014 and/or 2015?

- ☐ No. Please sign and submit this form to the Financial Aid Office. We will update your FAFSA to correct this information.
- ☐ Yes. Please complete the information below for the person in your household receiving SNAP benefits. If you are the one receiving benefits, please indicate "self" in ***Relationship to Student***. Sign and submit this form to the Financial Aid Office.

_____ Recipient's Last Name	_____ First Name	_____ MI	_____ Age	_____ <i>Relationship to Student</i>
_____ Street	_____ City	_____ ST	_____ Zip	_____ Phone Number

We may be required to collect additional information before we can determine your eligibility for financial aid. If additional information is required, we will notify you and a new item will appear on your WaveNet Account.

I (We) certify that all of the information reported on this worksheet is complete and correct. The student must sign this worksheet. If married, the spouse's signature is optional. **If the student is dependent, one of the parents must sign below.**

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

_____ Student's Signature
_____ Parent's Signature (<i>Required for Dependent Student</i>)

_____ Date
_____ Date

Submit this worksheet to:
Horry Georgetown Technical College
Financial Aid Office
PO Box 261966, Conway, SC 29528- 6066
1-855-544-HGTC (4482) Fax (843) 347-2962