

## Boston University Financial Assistance

# 2015-2016 Quality Assurance SNAP Benefits Verification for Dependent Students

Your application was randomly selected for data verification as part of the U.S. Department of Education's Institutional Quality Assurance Program. You must complete this worksheet and submit any documentation requested below. Your compliance with QA program requirements is mandatory to receive any type of federal, state or institutional aid. Other documents, including 2014 tax returns and W-2 forms, may also be required in order to complete your financial aid application. Please see the Student Link for details.

#### A. Student Information

Last Name	First Name	MI	Email Address	
Address (Include Apartment Number)			Boston University ID Number	
City	State	Zip Code	Date of Birth	

## **B. Supplemental Nutrition Assistance Program (SNAP) Verification Statement**

You should only complete this section if your family received Supplemental Nutrition Assistance Program (SNAP) benefits (Food Stamps) in 2013 or 2014. Check the box that applies to you:

- □ I have attached a copy of a letter or other documentation from the agency that issued the Food Stamps my family received.
- □ I will submit a copy of a letter or other documentation from the agency that issued the Food Stamps my family received to Boston University on \_\_\_\_\_\_(date).
- □ I do not have a copy of a letter of other documentation from the agency that issued the Food Stamps my family received. I will complete the certification below.

#### C. Sign this Worksheet

Your parent(s) must sign the certification below. Please provide contact information in case we have questions about the data submitted.

# By signing this worksheet, we certify that our family received Supplemental Nutrition Assistance Program benefits in the 2013 or 2014 calendar year.

Print Parent's Full Legal Name	Parent's Signature	—
Parent's Email Address	Date	
Print Parent's Full Legal Name	Parent's Signature	
Parent's Email Address	Date	—

Submit the signed, completed worksheet and attached documentation to:

#### Boston University Financial Assistance 881 Commonwealth Ave Boston, MA 02215

Alternatively, you can fax them to us at 617-358-2792 or email it them us at *finaid*@*bu.edu*. If you choose to fax them, please write your BU ID number at the top of each page you fax. If you choose to email them, please include your name and BU ID number.