



Supplemental Nutrition Assistance Program (SNAP) Verification 2025-2026

Financial Aid Office
7390 S. 6th Street
Klamath Falls, OR 97603
(541) 882-3521
www.klamathcc.edu

(Please print and complete in blue or black ink)

_____	_____	_____
Last Name	First Name	Middle Initial
_____	_____	_____
Social Security Number	Date of Birth	ID #

You have indicated on your 2025-26 Free Application for Federal Student Aid (FAFSA) that in 2023 you (or your spouse) or anyone in your household (from question 93 or question 72) received benefits from the Supplemental Nutrition Assistance Program (SNAP).

Federal Regulations require that the KCC financial aid office verify that someone in your household received Food Stamps during the 2023 year.

I certify that I have received SNAP benefits during the 2023 year.

Signature: _____ Date: _____

Note: If KCC has reason believe that this information is not accurate, KCC may require additional documentation. Each person signing this worksheet certifies that all the information reported is complete and correct.

WARNING: Title 18, Section 1001 of the U.S. Code states that a person is guilty of a felony for knowingly and willing making false or fraudulent statements to any department of the United States Government.