



**KLAMATH**  
Community College

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

# Supplemental Nutrition Assistance Program (SNAP) Verification 2020-2021

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

You have indicated on your 2020-21 Free Application for Federal Student Aid (FAFSA) that in 2019 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 2019 year.

I certify that I have received SNAP benefits during the 2019 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.