



2017-2018
Verification of SNAP Benefits
and Child Support Paid

SSN: _____

DBU Student ID: _____

Student's Full Name: _____
Last First MI

SNAP (Supplemental Nutrition Assistance Program) Benefits:

If you are considered an INDEPENDENT STUDENT, did you receive SNAP Benefits (Food Stamps) during the 2015 or 2016 calendar years? [] Yes [] No

If you are considered a DEPENDENT STUDENT, did your parents receive SNAP Benefits (Food Stamps) during the 2015 or 2016 calendar years? [] Yes [] No

Child Support Paid:

If you are considered an INDEPENDENT STUDENT, please provide the following information for you or your spouse during the 2015 or 2016 calendar years.

If you are considered a DEPENDENT STUDENT, please provide the following information for your parents during the 2015 or 2016 calendar years.

Name of individual who paid support: _____

Name of child support recipient: _____

Name(s) of children for whom support was paid: _____

Amount of support paid during the 2015 or 2016 calendar years: \$ _____

Student Signature Date Parent Signature (dependent students only) Date

Spouse Signature (if applicable) Date

Return this completed form to:

Office of Financial Aid - Dallas Baptist University - 3000 Mountain Creek Pkwy - Dallas, TX 75211
Please scan, attach, and email to finaid@dbu.edu or fax (214)-333-5586.

Income Verification

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