Certification of SNAP-Food Stamps (Supplemental Nutrition Assistance Program) Benefits
Complete this section if someone in the household received benefits from the Supplemental Nutrition Assistance Program or SNAP (formerly known as food stamps) any time during the 2014 or 2015 calendar years. The Financial Aid Office may request documentation from the agency that issued the SNAP-Food Stamps benefit. You do not need to supply this documentation unless it is specifically requested.

<table>
<thead>
<tr>
<th>Name of household member that received SNAP-Food Stamp benefits during 2014 and/or 2015</th>
<th>Relationship to student</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

☐ No members in the household received benefits from the Supplemental Nutrition Assistance Program or SNAP any time during the 2014 or 2015 calendar years.

Certification of Child Support Paid
Complete this section if an amount was listed under the student and/or parent Child Support Paid question of the FREE Application for Federal Student aid or FAFSA. The Financial Aid Office may request documentation. You do not need to supply this documentation unless it is specifically requested.

- A statement from the individual receiving the child support showing the amount provided OR
- Copies of the child support cancelled checks, payroll deduction or money order receipts

<table>
<thead>
<tr>
<th>Name of Person Who Paid Child Support</th>
<th>Name of Person to Whom Child Support was Paid</th>
<th>Name of Child for Whom Support Was Paid</th>
<th>Amount of Child Support Paid in 2015</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tr>
</tbody>
</table>

☐ No members in the household paid child support to any person(s) during the 2015 calendar year.

Certification and Signatures
Each person signing this worksheet certifies that all of the information reported on it is complete and correct. The student and one parent must sign and date.

Student’s Name ___________________________ Date ___________________________

Parent’s Name ___________________________ Date ___________________________

Submit this worksheet to the Financial Aid Office at Northeastern Illinois University.
5500 North Saint Louis Avenue (D-200)
Chicago, Illinois 60625-4699
Telefax: 773-442-5040 ● Email: Financial-Aid@neiu.edu
You should keep a copy of this worksheet for your records.

FOR OFFICE PURPOSES ONLY: This Worksheet should only be accepted for VERIFICATION TRACKING GROUP FOUR