

Office of Financial Aid & Scholarships

2023-2024 CERTIFICATION OF PARENT SNAP (FOOD STAMPS) BENEFITS

Student's	s Name:	LSU ID: 89
question		household* (*only those persons included in FAFSA on Assistance Program or SNAP (formerly known as e certification statement below.
	One of the persons in my parent's household* received SNAP benefits in 2021 or 2022.	(list the individual's name here)
	No one in my parent's household* received SNAP benefits in 2021 or 2022.	
will pro	ng this statement, I certify that all information on this vide documentation of the receipt of SNAP benefits or ing information on this worksheet, you may be fine	form is complete and correct. If asked by my school, I luring 2021 or 2022. *If you purposely give false or d, be sentenced to jail, or both.
Note: E	lectronic Signatures will not be accepted. You must p	rint to sign.
Student'	s Signature:	Date:
Parent's	Signature:	Date: