This form is used to help the County Assistance Office determine if the student listed above may be eligible for SNAP benefits (food stamps) under federal SNAP student regulations. *This form must be completed and signed by a school official.* The college may also provide this information in a letter.

Please answer the questions below:

1. Is the student attending a Pennsylvania community college? □ Yes □ No
   College Name: _______________________________________________________

2. Is the student enrolled in school at least half-time? □ Yes □ No

3. Is the student participating in work study? □ Yes □ No

4. Please list the student’s course of study/major: _______________________________________________________

Certification and Signature:

I certify by my signature below that the college considers the above-mentioned student’s course of study to be either:
1.) a career and technical education program under the *Carl D. Perkins Career and Technical Education Improvement Act of 2006*, or,
2.) associated with a high priority occupation*.

____________________________________________________  ______________________
Signature of School Official                          Date

____________________________________________________  ______________________
Printed Name of School Official                        Title

____________________________________________________  ______________________
Name of School                                         Phone Number

*For more information on high priority occupations, please visit [http://www.workstats.dli.pa.gov/Products/HPOs/Pages/default.aspx](http://www.workstats.dli.pa.gov/Products/HPOs/Pages/default.aspx).*