

2024-25 UNACCOMPANIED HOMELESS YOUTH VERIFICATION FORM

Student Name _____ Student ID# _____

You reported in your Free Application for Federal Student Aid (FAFSA) either that you are an unaccompanied youth who is homeless or an unaccompanied youth providing for your own living expenses who is at risk of being homeless. To determine your eligibility for financial aid, the Financial Aid Office needs additional information.

Homeless – means lacking fixed, regular, and adequate housing, which includes living in shelters, motels, cars, or temporarily living with other people because you had nowhere else to go. Also, if you are living in any of these situations and are fleeing an abusive parent, you may be considered homeless even if your parent(s) would provide support and a place to live.

Unaccompanied – means you are not living in the physical custody of your parent or guardian.

If you have been determined on or after July 1, 2023, to be homeless by your high school, a shelter, or another institution, please do not submit this form. Complete and submit the Dependency Status Verification Form.

1. Approximate date you became homeless _____

2. Duration of homelessness _____ to _____

3. Did you reside with your parent(s) **when you were homeless**? Yes No

4. Where did you reside **when you were homeless**?

a. ___ Motel

b. ___ Car

c. ___ Campsite

d. ___ Shelter or other temporary housing program

e. ___ Temporarily living with others due to nowhere else to go.

f. ___ Other – Please explain: _____

5. Do you **currently** reside with your parent(s)? Yes No

6. Where do you **currently** reside? (Check only the one that applies)

a. ___ In a house or apartment with my parent(s)

b. ___ With friends or family (fixed, regular, and adequate)

c. ___ My own house or apartment

d. ___ Motel, car, campsite, shelter, or other temporary housing program

e. ___ Temporarily with friends or family due to loss of housing, economic hardship, etc.

f. ___ Other – Please explain: _____

7. Please check all scenarios that apply to you from July 1, 2023.

a. ___ I am self-supporting and receive zero help from others.

b. ___ I am homeless or at risk of being homeless due to inadequate fixed income and support.

c. ___ I am not self-supporting and receive adequate assistance/support from family/others.

d. ___ My parents would provide housing; however, it is an unsafe or abusive environment.

e. ___ Other – Please explain: _____

Based on the information you provided on this form; the College will decide on whether you qualify as an unaccompanied homeless youth or unaccompanied youth at risk of being homeless for FAFSA purposes. Additional information may be requested.

Student's Signature_____
DATE***SIGNATURES MUST BE HANDWRITTEN***