

## 2026-27 Unaccompanied Homeless Youth Verification Form

A student is independent if at any time on or after July 1, 2025 (irrespective of whether they are currently homeless or at risk of being homeless), the student is determined to be an unaccompanied youth who is homeless or is self-supporting and at risk of being homeless. Any student under the age of 24 may qualify for a homeless youth determination. This determination can be made by, and must be substantiated by:

- A school district homeless liaison,
- The director (or designee) of an emergency shelter or transitional shelter, street outreach program, homeless youth drop-in center, or other program serving those experiencing homelessness or,
- The director (or designee) of a project supported by a federal TRIO program or a Gaining Early Awareness and Readiness for Undergraduate Programs (GEAR UP) grant, or,
- College Financial Aid Administrator (with a scheduled interview and supporting documentation).

If an applicant believes that he or she is homeless or at risk of being homeless they should answer “yes” to the unaccompanied and homeless question on the 2026-27 FAFSA. The Financial Aid Office is required to follow up on this designation and to make a homeless youth determination. If written documentation to support the applicant’s claim of homelessness is not available, the Financial Aid Office’s determination may be made based on a documented interview with the applicant and supporting documentation from a recognized third party. Documentation that may be considered in making this determination includes, but is not limited to, information collected from the following:

- Local school district personnel;
- State homeless education coordinators;
- Third parties such as private or publicly funded homeless shelters and service providers;
- Financial aid administrators from other colleges;
- Staff from college access programs, such as TRIO or GEAR UP;
- College or high school counselors; or
- Mental health professionals, social workers, mentors, doctors, and clergy.

If your situation cannot be documented, we will not be able to process your FAFSA as an independent student and you must go back to enter all parent information.

**Financial Aid Specialists will review your request based on the documentation submitted.  
Notification of the results will be sent to you via your SC Mail account.**

Submission Instructions: You must return this form in one of the following ways:

Upload in  
Ocelot Access

Or scan/email to:  
[finaid@schoolcraft.edu](mailto:finaid@schoolcraft.edu)

Or Print and mail OR return to:  
Schoolcraft College  
Office of Financial Aid  
18600 Haggerty Road  
Livonia, MI 48152

Or FAX to:  
(734) 462-4527

Homelessness is defined as:

- Homeless means lacking fixed, regular, and adequate housing, which includes living in shelters, motels, cars, or temporarily living with other people.
- Unaccompanied means you are not living in the physical custody of your parent(s) or guardian(s).

**I am a homeless youth as determined by:**

**(Please check ONE of the following circumstances and provide all information requested.)**

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- ☐ **SCHOOLCRAFT COLLEGE** – I am an unaccompanied youth who was previously determined homeless or at risk of being homeless by Schoolcraft College.
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- ☐ **HIGH SCHOOL** – I am an unaccompanied youth who was determined homeless or at risk of being homeless by a high school or school district homeless liaison.

**Required Documentation:**

- A copy of the letter determining your homeless status on high school/school district letterhead with school official signature, from your McKinney-Vento School District Liaison. Or,
  - Completed and signed Certifying Official Form (page 5 of this document)
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- ☐ **DIRECTOR/DESIGNEE OF AN EMERGENCY OR TRANSITIONAL SHELTER, STREET OUTREACH PROGRAM, HOMELESS YOUTH DROP-IN CENTER, OR OTHER PROGRAM SERVING THOSE EXPERIENCING HOMELESSNESS** – I am an unaccompanied youth who was determined homeless or at risk of being homeless by one or more of the individuals identified on page 1 of this form.

**Required Documentation:**

- A copy of the letter determining your homeless status on official letterhead with the certifying official's signature. Or,
  - Completed and signed Certifying Official Form (page 5 of this document)
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- ☐ **TRIO OR GEAR UP GRANT ADMINISTRATOR** – I am an unaccompanied youth who was determined homeless by a director or designee of a project supported by a federal TRIO program or a Gaining Early Awareness and Readiness for Undergraduate Programs (GEAR UP) grant.

**Required Documentation:**

- A copy of the letter determining your homeless status on official letterhead with the certifying official's signature. Or,
- Completed and signed Certifying Official Form (page 5 of this document).

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☐ **UNDETERMINED HOMELESS STATUS** – I am an unaccompanied youth who was not verified as homeless or at risk of being homeless by a certifying official or agency.

- ☐ Unaccompanied Homeless  
☐ Unaccompanied at Risk of Homelessness

My living situation lacks fixed, regular and/or adequate housing which includes the following scenarios.  
Please choose one of the following:

- ☐ Living in substandard housing without water and/or electricity  
☐ Living in shelters, motels, cars  
☐ Living in campgrounds, parks, abandoned buildings, bus or train stations, other private or public places not designed for humans to live  
☐ Living with other people temporarily (couch surfing)

(A student living in any of these situations and fleeing an abusive parent may be considered homeless even if the parent would provide support and a place to live.)

**Required Documentation:**

- A letter detailing your current living situation including a detailed timeline AND,
- Completed Affidavit (page 4 of this document) from the person the student is living with and/or whom supports the student, if applicable AND,
- Letters from an objective third-party that explains and confirms your homeless status.
- Eviction notice if “at risk of homelessness”

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If your explanation will disclose incidents of sexual misconduct (including but not limited to sexual assault, sexual harassment, stalking, dating violence, domestic violence) that information will be forwarded to our Title IX Coordinator via our SC Aware reporting process. You will receive an email providing an opportunity to meet, access resources, and to provide additional information which the college is required to send. You will not be required to provide any additional information about your situation. Additionally, if you would like to speak to a mental health specialist for support, you can request an appointment with our Student Support Specialist at 734-462-4486 or by emailing studentrelations@schoolcraft.edu

**Student Certification**

I certify that all information on this form is true, complete, and accurate. Upon request, I agree to provide proof of the information reported on this form. False statements or misrepresentation can be considered a cause for denial, reduction, withdrawal, and/or repayment of financial aid. I give permission to the Financial Aid Office to make corrections/adjustments to my data on the FAFSA based on forms and/or documents submitted.

Student Signature \_\_\_\_\_ Date \_\_\_\_\_  
(SIGNATURES MUST BE HANDWRITTEN)

## **Affidavit for Undetermined Homeless Status**

To be completed by the person that provides support and/or that the student lives with.

Student Name \_\_\_\_\_ SC ID# \_\_\_\_\_

The student above has indicated that they are unable to provide parent information due to unusual circumstances. Please complete this form and return it to the Financial Aid Office at Schoolcraft College.

1. What is your relationship to the student? \_\_\_\_\_

\_\_\_\_\_

2. How long have you known the student? \_\_\_\_\_

\_\_\_\_\_

3. When is the last date you are aware that the student:

a. Received financial support from parent(s)? \_\_\_\_\_

b. Lived with a parent(s)? \_\_\_\_\_

4. What is your knowledge of the student's family history and the relationship between the student and parent(s)?

\_\_\_\_\_

\_\_\_\_\_

5. Why is the student unable to obtain their parental information for financial aid purposes?

\_\_\_\_\_

\_\_\_\_\_

6. Who provides support for the student? \_\_\_\_\_

\_\_\_\_\_

Your Name \_\_\_\_\_ Phone # \_\_\_\_\_

Your Relationship to Student \_\_\_\_\_ Email \_\_\_\_\_

**I certify that the above information contained in these statements is true, complete, and accurate.**

Signature \_\_\_\_\_ Date \_\_\_\_\_

(SIGNATURES MUST BE HANDWRITTEN)

**THIS SECTION TO BE COMPLETED BY CERTIFYING OFFICIAL ONLY**

Student Name \_\_\_\_\_ SC ID# \_\_\_\_\_

**Contact Information for the Certifying Official:**

(Please send this completed form to Schoolcraft College. See contact information on page 1 of this form.)

Name &amp; Title: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

- ☐ A school district homeless liaison
- ☐ McKinney-Vento School District Liaison
- ☐ Director or designee of a HUD-funded shelter
- ☐ The director or designee of an emergency shelter or transitional shelter, street outreach program, homeless youth drop-in center, or other program serving those experiencing homelessness
- ☐ The director or designee of a project supported by a federal TRIO program or a Gaining Early Awareness and Readiness for Undergraduate Programs (GEAR UP) grant

As per the College Cost Reduction and Access Act (Public Law 110-84), I am authorized to verify this student's living situation. No further verification by the Financial Aid Administrator is necessary. Should you have additional questions or need more information about this student, please contact me at the number listed above.

This letter is to confirm that \_\_\_\_\_ was (check one):  
(Student's Name)

- ☐ An unaccompanied homeless youth on or after July 1, 2025.
- ☐ An unaccompanied, self-supporting youth at risk of homelessness on or after July 1, 2025.
- ☐ This means that, on or after July 1, 2025, the student was not in the physical custody of a parent or guardian, provides for their own living expenses entirely on their own, and is at risk of losing their housing.

Signature \_\_\_\_\_ Date \_\_\_\_\_  
(SIGNATURES MUST BE HANDWRITTEN)