

Homeless or At Risk of Homelessness Verification Form

Name _____ Student ID# _____

Phone _____ Email _____

Current mailing address: _____

Which academic year were you selected for verification? ☐ 2024-2025 or ☐ 2025-2026

You did not report information about your parents on your FAFSA because you indicated you are homeless, or at risk of homelessness. You must review this form carefully and take the appropriate actions.

Definition: You may fall under this category if you are not in the physical custody of your parent or guardian and are "homeless" meaning lacking fixed, regular, and adequate housing. This might include living in shelters, motels, vehicles, or temporarily living with other people because you have nowhere else to go. Also, if you are living in any of these situations and fleeing an abusive parent you may be considered homeless even if your parent would provide support and a place to live. **If you are unsure if your situation meets these definitions, or you need help in knowing what documentation to submit, please call the financial aid office.** The National Center for Homeless Education 1-800-308-2145 is also available if you have questions.

If you mistakenly indicated this on your FAFSA and are not homeless or at risk of homelessness, you must return to studentaid.gov, correct question 6, and provide your parent(s)' financial information and signature.

Complete this section and return this form if at any time on or after July 1, 2025, you were an unaccompanied youth who was homeless or at risk of being homeless. We **may** request a statement from an individual with whom you have temporarily lived with, or who knows of your situation. *Please provide documentation from an outside agency if possible:*

I am confirming/reaffirming that I am homeless or at risk of being homeless, as defined above by:

- ☐ A McKinney-Vento School District Liaison
- ☐ A director or designee of a HUD-funded shelter (HUD = Housing and Urban Development)
- ☐ A director or designee of a RHYA-funded shelter (RHYA = Runaway and Homeless Youth Act)
- ☐ A TRIO or GEAR UP college access program
- ☐ A mental health professional, social worker, employer, mentor, doctor, or clergy
- ☐ None of these fit my situation, but I am homeless or at risk of homelessness

**** ONLY COMPLETE THE FOLLOWING IF YOUR SITUATION HAS NOT BEEN CONFIRMED BY AN OUTSIDE AGENCY.**

Explain your current living situation (you must include dates and how long you have been in this situation). You must also provide a letter of explanation including supporting documentation detailing your current homeless situation or risk of homelessness.

Certification and Signature



SIGNATURE REQUIRED: I certify that the information provided on this form is true and complete to the best of my knowledge. I understand that based on the information provided changes FAFSA financial information may occur and may result in a change in financial aid eligibility.

Student Signature (Handwritten Required **OR ELECTRONIC SIGNATURE USING GLOBAL ID**)

Date