



Homeless Youth ♦ Emancipated Minor ♦ Legal Guardianship Verification Letter

Last Name First Name Date of Birth SSN # / Student ID #

Address (Include Apt #) City State/Zip Code Home Phone # / Cellphone #

According to your FAFSA application, you must verify one of the following:

♦ **HOMELESS YOUTH:**

I am providing this letter of verification because I am an unaccompanied youth, homeless: meaning I have no regular or adequate housing, which includes: living in shelters, motels, cars or temporarily living with other people, at anytime as of July 1, 2008. I am 21 years of age or younger. Check the box that applies to you.

- A McKinney-Vento School District Liaison: _____
- A director or designee of a HUD-funded shelter: _____
- A director or designee of a RHYA-funded shelter: _____

To be completed by an authorized agency: I am authorized to verify this student's living situation.

No further verification by the Financial Administrator is necessary (as per the College Cost Reduction and Access Act (Public law 110-84)). Should you have additional questions or need more information about this student, please contact me:

Name _____ Phone Number _____

Position _____ Agency _____ Date _____

I confirm that (student's name) _____

Social Security Number _____ met one of the following criteria:

1. An unaccompanied homeless youth after July 1, 2008.

This means that, after July 1, 2008, _____ was living in a homeless situation, as defined by Section 725 of the McKinney-Vento Act, and was not in the physical custody of a parent or guardian.

2. An unaccompanied, self-supporting youth, at risk of homelessness after July 1, 2008. This means that,

_____ was not in the physical custody of a parent or guardian, provides for his/her own living expenses entirely on his/her own, and is at risk of losing housing.

♦ **EMANCIPATED MINOR:**

I am providing documentation to verify that I became an emancipated minor by court order and remained one until the age of 18. I was emancipated on (date) _____ at the age of _____ in the state of _____. Attach a copy of the court order.

♦ **MINOR IN LEGAL GUARDIANSHIP BEFORE THE AGE OF 18:**

I am providing documentation to verify that I was in legal guardianship ordered by the court at the age of _____ on (date) _____ in the state of _____. Attach a copy of the court order.