

## 2025-2026 Verification of Unaccompanied or Homeless Youth

Student's Name:

Student's ID Number:

You indicated on your 2025-26 FAFSA that either your school district homeless liaison, the director of an emergency shelter funded by the US Department of Housing and Urban Development or the director of a runaway or homeless youth basic center or transitional living program has determined that you were an unaccompanied youth who was homeless or at risk of being homeless.

## Please check the box below and provide the appropriate information and signature.

Check one

	Your high school or school district homeless liaison has determined that you are an unaccompa or homeless youth. (This determination must have been made on or after July 1, 2024)	
	High School or School District Homeless Liaison Signature	Date
	High School Name or School District	
	The director of an emergency shelter funded by the US Department of Housing and Urban Development has determined that you are an unaccompanied youth who was homeless. (This determination must have been made on or after July 1, 2024)	
	Director's Signature	Date
	Name of Emergency Shelter	
	The director of a runaway or homeless youth basic center or transitional living program has determined that you were an unaccompanied youth who was homeless or at risk of being homeless. (This determination must have been made on or after July 1, 2024)	
	Director's Signature	Date
	Name of Program	
Dy signing this	I have <b>NOT</b> been determined to be an unaccompanied or h above.	

By signing this document, I certify that all the information reported is complete and correct. If I purposely give false or misleading information on this document, it will be cause for denial or repayment of financial aid and I may also be fined, sentenced to jail, or both.

Student Signature (Handwritten signature required)

Date