

## Unaccompanied Homeless Youth Verification Letter

20\_\_ to 20\_\_ Academic Year

**Student Name:** \_\_\_\_\_ **Student ID:** \_\_\_\_\_

(If you do not have a current mailing address, please list name, phone number and mailing address of a current contact):

\_\_\_\_\_

*The section below is to be completed only by a legally designated certifying official*

**This letter is to confirm that** \_\_\_\_\_ **was:**

First Name Initial Last Name

(Choose one)

\_\_\_ An unaccompanied homeless youth on or after July 1 of academic school year.

This means that, on or after July 1 this student 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.

\_\_\_ An unaccompanied, self-supporting youth at risk of homelessness on or after July 1 of academic school year.

This means that on or after July 1 this 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.

**I am providing this letter of verification as a:**

(choose one, then list name, phone number, and other contact information)

\_\_\_ A McKinney-Vento School District Liaison:

Name/address of school district \_\_\_\_\_

\_\_\_\_\_

\_\_\_ A director or designee of a HUD-funded shelter:

Name/address of HUD-funded shelter \_\_\_\_\_

\_\_\_\_\_

\_\_\_ A director or designee of a RHYA-funded shelter:

Name/address of RHYA-funded shelter \_\_\_\_\_

\_\_\_\_\_

**As per the College Cost Reduction and Access Act (Public Law 110-84), I am authorized to verify this student's living situation.**

Name of Certifying Official: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Signature of Certifying Official: \_\_\_\_\_