

## 2023-2024 UNACCOMPANIED HOMELESS YOUTH VERIFICATION

## STUDENT INFORMATION

First name	Mid	dle name			
Last name	ctcl	ink ID Number			
BACKGR	ROUND INFORMATION				
Application					
mot • Una • You the	meless meaning lacking fixed, regular and adequatels or cars, or temporarily living with other people accompanied meaning you are not living in the planth meaning you are 21 years of age or younger aday you signed the FAFSA or WASFA.	e because you had nowhere else to go. nysical custody of your parent or guardian.			
If you were determined to be unaccompanied homeless youth by an authorized official, please select the appropriate box below. You must provide documentation by submitting page 3 of this document (see below for more detail).					
	A high school or school district homeless liais	son or their designee			
	A HUD (U.S. Dept of Housing & Urban Deve	opment) funded program			
	A director (or their designee) of an emergency or transitional shelter, street outreach program, homeless youth drop-in center, or other program serving individuals who are experiencing homelessness				
	A director of TRIO or GEAR UP program or t	neir designee			
	A financial aid administrator at another institution who previously made a determination in the current or prior award year				

If you selected a box above, you must also provide a copy of page 3 completed and signed by the authorized official *or* other signed documentation provided by said authorized official. **If supporting documentation is not submitted, this form will be incomplete.** 

•	ır living situation o ving definition?	annot be verified by	the above officials, of	does your living situation m	eet the
		s, or cars or tempora	_	equate housing, which inclupeople "couch surfing" beca	-
	Yes	No			
•	•	-	d statement of your o	current living situation in add	dition to this
STUDENT	CERTIFICATI	ON			
information re withdrawal, ar	ported on this form nd/or repayment of	. False statements or financial aid. I give per	misrepresentation car ermission to the Financi	n request, I agree to provide p n be cause for denial, reductio ial Aid Office to make ns and/or documents submitte	n,
Student Sigr	nature			Date	

Everett Community College does not discriminate based on, but not limited to, race, color, national origin, citizenship, ethnicity, language, culture, age, sex, gender identity or expression, sexual orientation, pregnancy or parental status, marital status, actual or perceived disability, use of service animal, economic status, military or veteran status, spirituality or religion, or genetic information in its programs, activities, or employment. Contact the following people with inquiries or complaints regarding discrimination, Title IX compliance, or Americans with Disabilities Act compliance: Equal Opportunity Director: EqualOpportunity@everettcc.edu, 425-388-9271; ADA Coordinator: ADAcoordinator@everettcc.edu, 425-388-9232; Title IX Coordinator: TitleIXCoordinator@everettcc.edu, 425-388-9271. All offices are located in Olympus Hall 111, 2000 Tower St. Everett, WA 98201. For more information, visit the Equal Opportunity and Title IX website: EverettCC.edu/EqualOpportunity

## SECTION TO BE COMPLETED BY AUTHORIZED OFFICIAL ONLY

## CONTACT INFORMATION FOR CERTIFYING OFFICIAL Name Phone \_\_\_\_\_ Mailing Address City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_ I am providing this letter of verification as a (check one): ☐ McKinney-Vento School District Liaison or their designee ☐ Director or designee of a HUD-funded shelter (HUD—U.S. Dept of Housing & Urban Development) ☐ Director or designee of a RHYA-funded shelter (RHYA—Runaway & Homeless Youth Act) ☐ Director or designee of an emergency or transitional shelter (not HUD-funded), street outreach program, homeless youth drop-in center, or other program serving individuals who are experiencing homelessness □ Director of TRIO or GEAR UP program or their designee Financial Aid Administrator at another institution who made a determination in the same or prior year This letter is to confirm that \_\_\_\_\_ was (please check one below): An unaccompanied homeless youth on or after July 1, 2022. Living in a home situation, as defined by Section 725 of the McKinney-Vento Act, and was not in the physical custody of a parent or guardian, on or after July 1, 2022. An unaccompanied, self-supporting youth at risk of homeless on or after July 1, 2022. ☐ This means that, on or after July 1, 2022, 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. **AUTHORIZED OFFICIAL CERTIFICATION** 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. Signature Date

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