



Confirmation of Status of Unaccompanied Homeless Youth

California State University San Marcos
San Marcos, California 92096-0001 USA
Tel: (760) 750-4850; Fax: (760) 750-3047
finaid@csusm.edu
www.csusm.edu

2009-2010 CONFIRMATION OF STATUS OF UNACCOMPANIED HOMELESS YOUTH

Name of Student _____

DOB _____ Student ID _____

Based on the information you provided on the 2009-2010 FAFSA, our office requires confirmation of your homeless or unaccompanied youth status. On your 2009-2010 FAFSA application, you entered "YES" to one of these dependency status questions; #58, 59, or 60. To assist and guide you in the process of financial aid eligibility and awarding, we require that you take this form and obtain a signature (and documentation, if available) from one the Agencies listed below to verify that you an Unaccompanied and/or Homeless Youth and unable to provide parent information on your 2009-2010 FAFSA. Return this form with the required Agency signature to the Financial Aid Office in person, via mail, or FAXED to 760 750 3047.

To be completed by District Liaison, Director, or Designee of HUD/RHYA funded shelter. Please complete Steps 1 and 2, sign this form, and return to student.

Step 1: I confirm that the student listed above was one of the following: (Please check one box)

- Unaccompanied homeless youth after July 1, 2008.
Unaccompanied, self-supporting youth at risk of homelessness after July 1, 2008.

Step 2: Include your Name, Title, Phone Number, and other contact information to indicate that you certify and are able to verify the student's living situation. (Please check one box)

- I am a McKinney-Vento School District Liaison:
I am a Director or Designee of a HUD-funded shelter:
I am a Director or Designee of a 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. 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 number listed above.

Liaison, Director, or Designee Signature

Date