

Chandler-Gilbert | Estrella Mountain | GateWay | Glendale | Mesa Paradise Valley | Phoenix | Rio Salado | Scottsdale | South Mountain Maricopa Skill Center | NorthWest Skill Center | SouthWest Skill Center

ΜI

**Social Security Number** 

XXX-XX-

## 2014-2015 Federal Student Aid **Homeless Independent Request Form**

Homeless Ind Request

**Student ID Number** 

## **Instructions:**

You reported on your Free Application for Federal Student Aid (FAFSA) that you are a "dependent" student who is 22 or 23 years of age (or 21 years of age or younger but answered "No" to all three homelessness dependency status questions). You must complete and submit this form and supporting documentation to you campus Financial Aid Office for review. Processing of this form may be delayed if information or documentation is incomplete, or there are inconsistencies that must be clarified. Note: A student is considered homeless if they lack fixed, regular, and adequate housing. This is broader than just living "on the street".

First Name

## **Student Information**

**Last Name** 

Maricopa Email Address	Phone Number with Area Code	
@maricopa.edu		
Student Circumstance: Please indicate which situation pertains to you.		
Temporarily living with other people because you have nowhere else to go		
Living in substandard housing (if it doesn't meet local building codes or the utilities are turned off, it is generally not adequate)		
Living in emergency or transitional shelters, such as trailers, provided by the Federal Emergency Management Agency (FEMA) after disasters		
Living in motels, campgrounds, cars, parks, abandoned buildings, bus or train stations, or any public or private place not designed for humans to live in		
Living in the school dormitory if you would otherwise be homeless		
* A student living in any of these situations, and fleeing an abusive parent, may be considered homeless even if the parent would provide support and a place to live.		
Documentation:		
☐ I have attached one form of documentation to support my circumstance as it party, such as a school district homeless liaison, director [or designee] of an endesignee] of a runaway or homeless youth basic center or transitional living products and the school district homeless where the school district homeless is a school district homeless where the school district homeless where the school district homeless is a school district homeless where the school district homeless is a school district homeless where the school district homeless is a school district homeless where the school district homeless is a school district homeless where the school district homeless is a school district homeless where the school district homeless is a school district homeless where the school district homeless is a school district homeless where the school distr	nergency shelter program, director [or	

## **Certification and Signature**

I certify that the submitted information is true and correct to the best of my knowledge and belief. If asked by an authorized official, I agree to provide additional proof of the information provided on this form. I understand that purposely providing false or misleading information on this form may result in reduction or repayment of aid, fines and/or imprisonment in this and/or future years. I authorize the use of this information and any supporting documentation for all MCCCD institutions.

Student's Signature (electronic signature NOT accepted)	Date