

UNACCOMPANIED HOMELESS YOUTH VERIFICATION LETTER (16/17)

Student's Full, Legal Name:	
Student RCC ID #:	Date of Birth:
Phone/Message Phone:	E-mail:
Current Mailing Address: (If no current mailing address, please list the na	me, phone number and mailing address of a current contact.)
	ly-designated certifying official (check one) who, on/after July 1, mpanied youth who was homeless or were self-supporting and at risk of (per Section 725 of the McKinney-Vento Act):
shelters, parks, motels, cars, or are temporar if you are living in any of these situations and your parent would provide support and a pla	uate housing. You may be homeless if you are living in ily living with other people because you have nowhere else to go. Also, d fleeing an abusive parent, you may be considered homeless even if
Homeless Assistance Act (Not applied Director (or designee) of an emergency Dept. of Housing and Urban Develo	s liaison per section 722(g)(1)(J)(ii) of the McKinney-Vento able if no longer in high school.) y shelter or transitional housing program funded by the US opment (HUD) (Not applicable in So. Oregon.) homeless youth basic center or transitional living program
As per the College Cost Reduction and Accordillowing certification:	ess Act (Public Law 110-84), I am authorized to provide the
custody of a parent or guardian. [] I certify that on or after 7/1/15, this you	th was living in a homeless situation and was not in the physical th was not in the physical custody of a parent or guardian, enses entirely on his/her own, and/was at risk of becoming homeless.
Printed Name of Certifying Official:	Title:
Organization:	Address:
Phone:	E-mail:
Signature of Certifying Official:	Date:

OPTION 2

If you do not have a legally-designated certifying official that can certify your status, there's another option! (See next page.)

OPTION 2 (Continued)

If you do not have a legally-designated certifying official that can certify your status, your remaining option is to submit this form (Option 1 blank) with a signed statement of the facts and dates of your status, along with supporting documentation as listed below, to RCC's Financial Aid Department. Once it is reviewed by a Financial Aid Administrator (FAA; At RCC, the Financial Aid Director), you may be contacted to schedule an interview.

Documentation:

- 1. A signed personal statement that explains the facts regarding your living situation. Please focus on your situation since 7/1/15, but include relevant prior information. Be sure to include the nature of your contact with your parent(s) or guardian(s), significant dates, and the name(s) and address(s) of who you're temporarily living with, as applicable.
- 2. Two signed statements from as official sources as possible who know of and can attest to your living situation. This may include the adult whose home you are temporarily living in, a pastor, a counselor, an employer, or other significant participant in your story. Have them use letterhead whenever possible, and provide a statement of the relevant facts and significant dates that support your claim. If obtaining such documentation is seemingly not possible, the FAA will use the interview to brainstorm options and document the decision.

OFFICE USE ONLY: Certification of Qualifying Homelessness by the Financial Aid Administrator (FAA)		
Review/Interview Notes and Determination:		
· · · · · · · · · · · · · · · · · · ·		
I I certify that on or after 7/1/15, this youth was living in a home	eless situation and was not in the physical	
custody of a parent or guardian.	ciess situation and was not in the physical	
[] I certify that on or after $7/1/15$, this youth was not in the physical state of th		
provided for his or her own living expenses entirely on his or homeless.	her own, and was at risk of becoming	
I am unable to certify that this applicant is eligible to file a 16/1	7 FAFSA as a qualifying homeless youth.	
This determination may be appealed with supporting information	tion addressing the cause for denial.	
This determination is not a DO or PJ. If approved, it should be proce	ssed as #4 in the DO field.	
Printed Name of FAA: Anna Manley, Director of Financial Aid, Rogu	ne Community College	
Signature of Certifying Official:	Date:	