

2020-2021 HOMELESS INDEPENDENT REQUEST

| | | | |
|----------------------------|------------|---------------|----------------------------------|
| | | | |
| Last name | First Name | M.I. | Social Security Number |
| Address (include apt. no.) | | Date of Birth | |
| City | State | Zip Code | Phone Number (include area code) |

To Be Completed by Student:

You must submit this form along with supporting documentation to the financial aid office. A student is considered homeless if they lack fixed, regular, and adequate housing at any time after July 1, 2019.

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, for example, trailers provided by the Federal Emergency Management Agency (FEMA) after disasters
- Living in motels, camping grounds, 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
- To be released from prison or a hospital and do not have a stable housing situation to return
- Does not have adequate night time residence (this may include living with friends and/or extended family)

***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:

- Provide **one** form of documentation to support the information indicated above. Such as a letter from an outside party, for example: a school district homeless liaison, director (or designee) of a runaway or homeless youth basic center or transitional living program, etc.

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.

Student's Signature: _____

Date: _____