UHD ID:	Student's First Name:	Last Name:	



Office of Scholarships and Financial Aid

2023-2024 Unaccompanied Youth/Homeless Verification Form

Step 1: Student Information	
Current Address, City, State, Zip Code (If none, please lis	t name, phone number and mailing address of current
contact.)	
Phone Number	Date of Birth
Thome Number	Date of Birth
Step 2: This section is to be completed by the proper ve	
I am providing this letter of verification as a (check one):	:
USchool District Liaison	
School District:	Name
	— Phone Number
□Director or Designee of a HUD-funded shelter	
Name of Facility:	Name
	— Phone Number
Director or Designee of a RHYA-funded shelter	
Name of Facility:	Name
·	Phone Number
This letter is to confirm that	was an (check one):
Student	
	ans that after July 1, 2022, the student listed above was living in a
homeless situation, as defined by Section 725 of the McKinne quardian.	y-Vento Act, and was not in the physical custody of a parent or
· · · · · · · · · · · · · · · · · · ·	ess after July 1, 2022. This means that after July 1, 2022, the student
listed above was not in the physical custody of a parent or gu own, and is at risk of losing his/her housing.	ardian, provides for his/her own living expenses entirely on his/her
	40.04) Law outhorized to write this student/allising situation. No
-	10-84), I am authorized to verify this student's living situation. No ary. Should you have additional questions or need more information
about this student, please contact me at the number listed abo	
7 F	
Signature of Verifying Authority	Date
Student Signature	Date