

2017-2018 Unaccompanied Homeless Youth Verification Letter

For the Purpose of Federal Financial Aid

Name of Student:		GCU Student Number:			
DOB: _					
No furth	ner verification by the Financ		34), I am authorized to verify this student's living situation. Should you have additional questions or need more d below.		
This letter is to confirm that(Name of Student)			was:		
Check of		(Name of Stadent)			
	An unaccompanied home	eless youth after July 1, 2016			
	This means that, after July	1, 2016,	was living in a homeless situation, as defined		
	by Section 725 of the McK	inney-Vento Act, and was not in t	he physical custody of a parent or guardian.		
	□ An unaccompanied, self-supporting youth at risk of homelessness after July 1, 2016				
	This means that, after July	1, 2016,	was not in the physical custody of a parent or		
	guardian, provides for his own living expenses entirely on his own, and is at risk of losing his housing.				
I am pro	oviding this letter of verification	on as (check one): Please list na	me, phone number, and other contact information.		
	Print Name:		<u> </u>		
	Phone Number:				
	Address:				
			_		
	□ A Director or Designee of a HUD-funded shelter:				
	Print Name:		<u> </u>		
	Phone Number:		<u> </u>		
	Address:				

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	A Director of Designee o	of a RHYA-funded shelter:		
	Print Name:			
	Phone Number:			
	Address:			
the best	of your knowledge. You un	certifying that the information provide iderstand that any false statements of United States Criminal Code.		
Signatu	re:		Date:	
	NOTE: HANDWRIT	TEN CIONATURE REQUIRED TV	DED/ELECTRONIC CIONATURE	NOT ACCEPTED

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