

MARIAN UNIVERSITY

Indianapolis

Office of Financial Aid
3200 Cold Spring Road Indianapolis, IN 46222 317.955.6040 Fax: 317.955.6424

2024-25 Unaccompanied Homeless Youth Verification Form

Students who have answered "yes" to being an unaccompanied youth who was homeless or at risk of being homeless on the Free Application for Federal Student Aid (FAFSA) must have this information verified.

Student Name: _____ Marian ID# _____

I am providing this letter of verification as a (check one, then list name, phone number, and other contact information below):

- McKinney-Vento School District Liaison
- Director or Designee of a HUD-funded or Runaway and Homeless Youth Act-funded shelter
- Other; includes Director or Designee of a private or publicly funded homeless shelter or service provider, financial aid administrator, personnel from college access programs such as TRIO and GEAR UP, college or high school counselor, other mental health professionals, social worker, doctor, and clergy.

As per the College Cost Reduction and Access Act (Public Law 110-84), I am authorized to verify this student's living situation. No further verification by a Financial Aid Administrator is necessary.

This letter is to confirm that _____ was: *Name of Student*

Check one:

- An unaccompanied homeless youth after July 1, 2024, living in a homeless situation, as defined by Section 725 of the McKinney-Vento Act, and was not in the physical custody of a parent or guardian.
- An unaccompanied, self-supporting youth at risk of homelessness after July 1, 2024. This means that, after July 1, 2024, he/she was not in the physical custody of a parent or guardian, provides for his/her own living expenses entirely on his/her own, and is at risk of losing his/her housing.
- As a returning student to Marian University, I was previously designated as an Unaccompanied Homeless Youth. My situation has not changed and I am still considered an Unaccompanied Homeless Youth.

Authorized Signature: _____ Date: _____

Print Name: _____ Telephone: _____

Title: _____ Agency: _____