



Student Name: _____ **Student NUID:** _____

Phone Number: _____ **Birth Date:** _____

You indicated on your FAFSA that on or after July 1, 2023, you were unaccompanied and either homeless or self-supporting and at risk of being homeless.

For FAFSA purposes, the following definitions apply:

- *Homeless* – lacking fixed, regular, and adequate housing
 - This includes living in shelters, motels, or automobiles, or temporarily living with other people because the student has nowhere else to go
- *At risk of being homeless* – when housing may cease to be fixed, regular, and adequate
- *Unaccompanied* – not living in the physical custody of your parent or guardian
- *Self-Supporting* – when a student pays for their own living expenses, including fixed, regular, and adequate housing

To be able to determine your eligibility for federal aid, please complete the following questionnaire. Include a written statement explaining your current living situation in detail.

1. Do you have a homeless youth determination from any of the following? (If so, please attach):

School district homeless liaisons or their designee;

Director/designee of an emergency or transitional shelter, street outreach program, homeless youth drop-in center, or other program serving individuals experiencing homelessness;

Director/designee of a program funded under a TRIO or GEAR UP grant;

Financial Aid Administrator at another institution who previously made a determination

None of the above

2. In which of the following situations do you currently reside, or in which would you reside if not staying in on-campus housing (Select all that apply)

Motel

Car

Campsite

Shelter or other temporary housing program

Substandard housing (insufficient to meet the physical and psychological needs typically met in a home environment)

Temporarily staying with others due to loss of housing, economic hardship, etc.

- a. If you are currently staying with another household, what circumstances apply (select all that apply):

Loss of housing

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1000 Main Street, Chadron NE 69337



Fax: (308) 432-6474



Phone: (308) 432-6061

Economic hardship resulting in inability to secure and maintain fixed, regular, and adequate housing

Other (Examples: not safe for youth to live with parent/guardian, parent/guardian forced youth to leave home, other situations of abuse/conflict):

b. If you were not staying with this household, where would you live:

3. Attach a written statement, from you, the student, with further information about your living situation.

Signed and dated statement is attached

CERTIFICATION AND SIGNATURE:

Each person signing below certifies that all of the verification information reported is complete and correct. The parent(s) and/or stepparent, if applicable, must sign and date below. ***Electronic Signatures are not accepted.***

WARNING: If you purposely give false or misleading information you may be fined, be sentenced to jail, or both.

STUDENT SIGNATURE: _____ DATE: _____

PARENT/STEPPARENT SIGNATURE: _____ DATE: _____

FAA Use Only:

Independency Confirmed – Based on this form and documentation submitted, student is an unaccompanied homeless youth or unaccompanied and self-supporting and at risk of homelessness.

Independency Not Confirmed – See correspondence in student file with explanation and what next steps are needed.

FAA Name (printed): _____

FAA Title: _____

FAA Signature: _____ Date: _____

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