



UNACCOMPANIED HOMELESS YOUTH VERIFICATION LETTER 2019/20

Student's Full, Legal Name: _____

Student RCC ID #: _____ Date of Birth: _____

Phone/Message Phone: _____ E-mail: _____

Current Mailing Address: _____

(If no current mailing address, please list the name, phone number and mailing address of a current contact.)

OPTION 1

This section is to be completed only by a legally-designated certifying official (check one) who, on/after July 1, 2018, has determined that you were an unaccompanied youth who was homeless or were self-supporting and at risk of being homeless. Key definitions are as follows (per Section 725 of the McKinney-Vento Act):

“Unaccompanied” – Not living in the physical custody of your parent or guardian.

“Homeless” – Lacking fixed, regular and adequate housing. You may be homeless if you are living in shelters, parks, motels, cars, or are temporarily living with other people because you have nowhere else to go. Also, if you are living in any of these situations and fleeing an abusive parent, you may be considered homeless even if your parent would provide support and a place to live.

“Youth” – Less than 24 years old, or still enrolled in high school as of the day you filed your 2019-20 FAFSA.

_____ High school or school district homeless liaison per section 722(g)(1)(J)(ii) of the McKinney-Vento Homeless Assistance Act (Not applicable if no longer in high school.)

_____ Director (or designee) of an emergency shelter or transitional housing program funded by the US Dept. of Housing and Urban Development (HUD) (Not applicable in So. Oregon.)

_____ Director (or designee) of a runaway or homeless youth basic center or transitional living program (Not applicable in So. Oregon.)

As per the College Cost Reduction and Access Act (Public Law 110-84), I am authorized to provide the following certification:

[] I certify that on or after 7/1/18, this youth was living in a homeless situation and was not in the physical custody of a parent or guardian.

[] I certify that on or after 7/1/18, this youth was not in the physical custody of a parent or guardian, provided for his or her own living expenses entirely on his/her own, and/was at risk of becoming homeless.

Printed Name of Certifying Official: _____ Title: _____

Organization: _____ Address: _____

Phone: _____ E-mail: _____

Signature of Certifying Official: _____ Date: _____

OPTION 2

If you do not have a legally-designated certifying official that can certify your status, there's another option! (See next page.)

RCC is an open institution and does not discriminate. For RCC's non-discrimination policy and a full list of regulatory specific contact persons visit the following webpage: www.roguecc.edu/nondiscrimination.

OPTION 2 (Continued)

If you do not have a legally-designated certifying official that can certify your status, your remaining option is to submit this form (Option 1 blank) with a signed statement of the facts and dates of your status, along with supporting documentation as listed below, to RCC's Financial Aid Department. Once it is reviewed by a Financial Aid Administrator (FAA; At RCC, the Financial Aid Director), you will be contacted to schedule an interview.

Documentation:

1. A signed personal statement that explains the facts regarding your living situation. Please focus on your situation since 7/1/18, but include relevant prior information. Be sure to include the nature of your contact with your parent(s) or guardian(s), significant dates, and the name(s) and address(s) of who you're temporarily living with, as applicable.
2. Two signed statements from as official sources as possible who know of and can attest to your living situation. This may include the adult whose home you are temporarily living in, a pastor, a counselor, an employer, or other significant participant in your story. Have them use letterhead whenever possible, and provide a statement of the relevant facts and significant dates that support your claim. If obtaining such documentation is seemingly not possible, the FAA will use the interview to brainstorm options and document the decision.

OFFICE USE ONLY: Certification of Qualifying Homelessness by the Financial Aid Administrator (FAA)

Review/Interview Notes and Determination: _____

- I certify that on or after 7/1/18, this youth was living in a homeless situation and was not in the physical custody of a parent or guardian.
- I certify that on or after 7/1/18, this youth was not in the physical custody of a parent or guardian, provided for his or her own living expenses entirely on his or her own, and was at risk of becoming homeless.
- I am unable to certify that this applicant is eligible to file a 2019-20 FAFSA as a qualifying homeless youth. This determination may be appealed with supporting information addressing the cause for denial.

This determination is not a DO or PJ. If approved, it should be processed as #4 in the DO field.

Printed Name of FAA: Financial Aid Director, Rogue Community College

Signature of Certifying Official: _____ Date: _____

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