

Homeless Affirmation Form 2015-2016

Last Name: _____ First Name: _____

Last Four Digits of SSN: _____ EMPL ID: _____

On your 2015-2016 Free Application for Federal Student Aid (FAFSA), you indicated that you are an unaccompanied, self-supporting youth who is homeless or at risk of homelessness. This qualifies you as an independent student for financial aid purposes. Please read the following and answer the proceeding questions.

- Homeless, for financial aid purposes, means lacking fixed, regular and adequate housing, which includes living in shelters, motels or car, or temporarily living with other people because you, the student, had nowhere else to go.
- Unaccompanied means that you are not living in the physical custody of your parent or guardian.
- Youth means that you are 21 years of age or younger or you are still enrolled in high school as of the day you sign this application.
- At any time on or after July 2014, did your high school or school district homeless liaison determine that you were an unaccompanied youth who was homeless?
[] Yes. If yes, submit appropriate documentation as described below.
[] No. Continue with this form
- At any time on or after July 2014, did the director of an emergency shelter or transitional housing program funded by the U.S. Department of Housing and Urban Development determine that you were an unaccompanied youth who was homeless?
[] Yes. If yes, submit appropriate documentation as described below.
[] No. Continue with this form
- At any time on or after July 2014, did the director of a runaway or homeless youth basic center or transitional living program determine that you were an unaccompanied youth who was homeless or were self-supporting and at risk of being homeless?
[] Yes. If yes, submit appropriate documentation as described below.
[] No. See below

If none of the previous situations describe your circumstances, you must be considered a dependent student. In this case, you must submit a FAFSA Parental Information Form with you biological/adoptive parental income information and signature(s). To obtain this form, visit the "Printable forms" section of our website.

Required Appropriate Documentation

You must submit verification of your status from a local educational homeless liaison, a director of an emergency shelter grant program under McKinney-Veto Homelessness Act or a director of a program funded under Runaway Homeless Youth Act,. This verification form must be submitted to our office on letterhead and must be attached to this form.

Non-Discrimination Notice - Hostos Community College does not discriminate on the basis of race, color, national origin, sex, disability, age, or any other category protected under federal, state, and city laws in its programs and/or activities. Inquiries regarding the College's non-discrimination policies can be directed to: Compliance Officer Michele Dickinson (Room A-336) at 718-518-4284 or mdickinson@hostos.cuny.edu

Student Signature _____ Date _____