

## **2022-2023 Unaccompanied Youth Form** Office of Financial Aid and Scholarships

P.O. Box 3011 Commerce, Texas 75429 Phone: 903.886.5096 Fax: 903.886.5098 FAO.Web@tamuc.edu

STUDENT NAME:		CWID:	
Note: You should submit thi	s form if you had a determination that you were an un	accompanied youth that was homeless or at risk of	of homelessness on or after July 1, 2022.
Instructions to stude Submit this form to shelter.	lent: the high school counselor designated	as the McKinney-Vento Liaison or	r the director of the housing
for financial aid pur	Application for Federal Student Aid cooses if they have received a determine the who was homeless or at risk of being	nation at any time on or after July 1	
This letter is to co	nfirm that		was:
	(Student's N	(ame)	
o Tl de gu An unacco o Tl or ho	mpanied homeless youth on or after July 1, 2 fined by Section 725 of the McKin ardian.  mpanied, self-supporting youth at risk his means that, on or after July 1, 2022 guardian, provides for his/her own libusing.	022, the above named student was new-Vento Act, and was not in of homelessness on or after July 2, the above named student was no	the physical custody of a parent or  1, 2022  t in the physical custody of a parent
	etter of verification as: priate designation below)		
A McKinn	ey-Vento School District Liaison		
A director	or designee of a HUD-funded shelter		
A director	or designee of a RHYA-funded shelte	r	
A director	or designee of a runaway or homeless	youth basic center or transitional l	iving program
	Cost Reduction and Access Act (Public on by the Financial Aid Administrator		verify this student's living situation.
Name:			
Printed name of Cert	fying Official authorized to verify student's living situ	uation.	
Signature:		Phone:	
Email:			Date: