



Please print in black ink only.

Student Name: \_\_\_\_\_  
Last Name First Name/MI Student ID

Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
Street Address Apt #

\_\_\_\_\_  
City State Zip

(If you do not have a current mailing address, please list name, phone number and mailing address of a current contact.)

**The section below is to be completed only by a legally designated certifying official**

Please Check ( ✓ ) the appropriate request(s) and return to the Financial Aid Office.

**This letter is to confirm that this student meets one of the criteria below:** (check one)

\_\_\_\_\_ An unaccompanied homeless youth on or after July 1, 2014.  
This means that on or after July 1, 2014, this student was 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 on or after July 1, 2014.  
This means that on or after July 1, 2014, this student 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.

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

\_\_\_\_\_ A McKinney-Vento School District Liaison:  
Name/address of school district

\_\_\_\_\_ A director or designee of a HUD-funded shelter:  
Name/address of HUD-funded shelter.

\_\_\_\_\_ A director or designee of a RHYA-funded shelter:  
Name/address of RHYA-funded shelter.

\_\_\_\_\_ Financial Aid Administrator (See Back)

**As per the College Cost Reduction and Access Act (Public Law 110-84), I am authorized to verify this student's living situation.**

Name of Certifying Official: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Signature of Certifying Official: \_\_\_\_\_

*Columbia Gorge Community College is an equal opportunity educator and employer.*

Eligibility Tool for Financial Aid Administrators

This form is to be completed by the financial aid administrator (FAA) who is evaluating a student's eligibility for independent student status.

Student Name: \_\_\_\_\_
Last Name First Name/MI Student ID

FAA Determination Based on a Documented Interview

- 1. In which of the following situations does the student currently reside (you may choose more than one):
Motel Shelter or other temporary housing program
Car Inadequate housing (adequate housing is sufficient to meet both physical and psychological needs)
Campsite Temporarily living with others because student has nowhere else to go
2. If the student is living with another household, check all of the following reasons that apply:
Economic hardship resulting in inability to access fixed, regular, and adequate housing
Loss of housing
Other (including, for example, when it is not safe for a youth to live with a parent or guardian, when a parent or guardian has forced a child or youth to leave the home, and other situations of abuse or conflict)

Note: If the student is living in any of these situations, and is not in the physical custody of a parent or guardian, he or she meets the definition of homeless and unaccompanied, and qualifies as an independent student. A youth fleeing abuse or neglect and living in one of these situations is considered homeless, even if the parent would provide support and a place for him/her to live.

FAA Determination: Considerations for Students Who Are Self-Supporting and At Risk of Homelessness

- 1. Is the student self-supporting: (Self-supporting means the student is responsible for his or her own living expenses, including fixed, regular, and adequate housing.) Yes No
2. Is the student's housing likely to cease to be fixed, regular, and adequate? Is the student at-risk of homelessness due to eviction or other loss of housing? Yes No

If the student answers yes to both of these questions, and is not in the physical custody of a parent or guardian, he or she meets the definition of an unaccompanied youth who is self-supporting and at risk of homelessness, and qualifies as an independent student.

Action Taken

- Independent student status confirmed
Independent student status not confirmed; please

explain: \_\_\_\_\_

Print Name Signature
Title Date

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