

2019/2020 Unaccompanied Homeless Youth Documentation Verification Letter

Please provide the	following information:		
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 mail	ing address of a current contact.)
You indicated on your 2019-20 <i>Free Application for Federal Student Aid</i> (FAFSA) that on or after July 1, 2018 you qualified as an independent student for financial aid purposes as an unaccompanied youth who was homeless, or self-supporting and at risk of being homeless, as determined by:			
• Your high school or school district homeless liaison,			
• The director of an emergency shelter or transitional housing program funded by the U.S. Department of Housing and Urban			
Developmen ⁻	t (HUD), or		
• The director	of a runaway or homeless youth basic	center or transitional living prog	ıram.
Please contact the appropriate official, ask them to write a letter on school/agency letterhead that confirms their designation of your status, and attach that letter to this form. They may also send the letter directly to us at:			
Columbia Gorge (Financial Aid Offi 400 E. Scenic Dr. The Dalles, OR 9			
Once we receive this form and their letter, we will continue to review your financial aid application.			
l certify that the i	nformation provided is true ar	nd complete to the best of	my knowledge:
Signature:			Date: