



OFFICE OF STUDENT FINANCIAL AID

2800 S Lone Tree Rd
Flagstaff, AZ 86005-2701
PH: 928-226-4219
FAX: 928-226-4110
finaid@coconino.edu

UNACCOMPANIED OR HOMELESS YOUTH VERIFICATION (2023-2024 ACADEMIC YEAR)



Scan the code on your phone and follow instructions to upload this document to CCC.

CCC ID#	Last Name	First Name	MI
Mailing Address		City	ST Zip Code
Phone # (include area code)	CCC Student Email Address @students.coconino.edu		

Section 480(d)(1)(H) of the Higher Education Act of 1965 provides that an applicant for Financial Aid is an independent student who does not need to provide parental information on the FAFSA® if the applicant is an unaccompanied homeless youth as defined in the McKinney-Vento Homeless Assistance Act (McKinney-Vento) (42 U.S.C. 11434a) or is unaccompanied, at risk of homelessness, and self-supporting as verified by an Authorized Official. An Authorized Official is defined as a McKinney-Vento School District Liaison, Director or designee of a U.S. Department of Housing and Urban Development (HUD) or Runaway and Homeless Youth Act (RHYA)-funded shelter, or a Financial Aid Administrator. For more information visit <https://fsapartners.ed.gov/sites/default/files/attachments/dpccletters/GEN1516Attach.pdf>

I am completing this form as a:

- McKinney-Vento School District Liaison
- Director or designee of a HUD-funded shelter (*shelter name*): _____
- Director or designee of an RHYA-funded shelter (*shelter name*): _____
- Financial Aid Administrator at CCC

I confirm the following that _____ was:
Please print the student's name

- An unaccompanied homeless youth after July 1, 2022.
 - o After July 1, 2022, the 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 after July 1, 2022.
 - o After July 1, 2022, the student was not in the physical custody of a parent or guardian, provides for his or her own living expenses entirely on his or her own, and is at risk of losing his or her housing.

Authorized Official Information

Authorized Official Signature: Draw your signature with a mouse, touchscreen, or pen. Do not type.	Date
Print Name	Title
Agency	Phone Number

I certify that information provided on this form is true and complete to the best of my knowledge. Purposely giving false or misleading information may result in a delay or denial of my federal financial aid and I may be fined up to \$20,000, sent to prison, or both. I hereby provide consent for the use of electronic records and signatures on all financial aid documents. I understand that if I choose to sign electronically, my electronic signature constitutes a binding contract and may not be denied legal effect, validity, or enforceability solely because it is in electronic form or because an electronic signature or electronic record was used in its formation.

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Draw your signature with a mouse, touchscreen, or pen. Do not type.

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Date

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