



Financial Aid/Scholarships Department  
 One University Circle, Turlock, CA 95382  
 Telephone (209) 667-3335 Fax (209) 664-7064  
[www.csustan.edu/financialaid](http://www.csustan.edu/financialaid)

Student: \_\_\_\_\_

ID# \_\_\_\_\_

## 2009-2010 Unaccompanied Homeless Youth Verification Letter

**Re:** Student Name: \_\_\_\_\_

**DOB:** \_\_\_\_\_

**SSN:** \_\_\_\_\_

Current Mailing Address of Student (if none, please list name, phone number, and mailing address of current contact):

I am providing this letter of verification as a (Check ONE, then list name, phone number, and other contact information):

A School District Liaison: \_\_\_\_\_

A director or designee of a **HUD**-funded shelter: \_\_\_\_\_  
 (HUD-U.S. Department of Housing & Urban Development)

A director or designee of a **RHYA**-funded shelter: \_\_\_\_\_  
 (RHYA- Runaway & Homeless Youth Act)

As per the College Cost Reduction and Access Act (Public Law 110-84), I am authorized to verify this student's living situation. No further verification by the Financial Aid Administrator is necessary. Should you have additional questions or need more information about this student, please contact me at the number listed above.

This letter is to confirm that \_\_\_\_\_ was:  
 Student's Name

Check one:

An unaccompanied homeless youth after July 1, 2008

This means that, after July 1, 2008, \_\_\_\_\_ was living in a home situation, as defined by  
 Student's Name  
 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, 2008.

This means that, after July 1, 2008, \_\_\_\_\_ was not in the physical custody of a parent or guardian,  
 Student's Name  
 provides for his/her own living expenses entirely on his/her own, and is at risk of losing his/her housing.