2016-17 Homeless Unaccompanied Youth Verification Form

Student Name  SSU I.D.

**Instructions:** When you filed your financial aid application, you indicated that at some time on or after July 1, 2015 you were determined to be an unaccompanied youth who was homeless. To show that you meet the criteria to be considered an independent student, you must provide documentation (preferably from the person who made the determination). Please complete this form, attach the appropriate documentation, sign the certification below, and return the form to the Financial Aid Office as soon as possible.

*If you are not able to provide the documentation listed below,* contact the Financial Aid Office at finaid@sonoma.edu or (707) 664-2389 so that we may assist you.

Please respond to the following questions:

1. At any time on or after July 1, 2015, did your high school or school district homeless liaison determine that you were an unaccompanied youth who was homeless?  
   [ ] Yes  [ ] No
   
   If Yes, you must provide documentation.

2. At any time on or after July 1, 2015, did the director of an emergency shelter or transitional housing program funded by the U.S. Department of Housing and Urban Development determine that you were an unaccompanied youth who was homeless?  
   [ ] Yes  [ ] No
   
   If Yes, you must provide documentation.

3. At any time on or after July 1, 2015, did the director of a runaway or homeless youth basic center or transitional living program determine that you were an unaccompanied youth who was homeless or were self-supporting and at risk of being homeless?  
   [ ] Yes  [ ] No
   
   If Yes, you must provide documentation.

4. Did the Financial Aid Administrator at your previous college determine that you were independent due to being an unaccompanied youth who was homeless?  
   [ ] Yes  [ ] No
   
   If Yes, your Financial Aid Representative will confirm this and contact you if necessary.

**Sign this Statement**

I certify that all the information reported on this form is complete and correct.

______________________________  ________________________
Student Signature  Date

______________________________
Phone Number