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Student ID (E Number) Last Name First Name

# 2024-2025 UNACCOMPANIED / HOMELESS YOUTH VERIFICATION FOR FEDERAL FINANCIAL AID

This student has indicated that they are a homeless student and therefore must provide documentation.

**OPTION 1:** 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.

Agency Representative: Please check one and complete Page 1

- ☐ A McKinney-Vento School District Liaison
- ☐ A director or designee of a HUD-funded shelter
- ☐ A director or designee of a RHYA-funded shelter

Re: _____ DOB: _____
Name of Student

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

I confirm the above-named student was: (check one):

☐ An unaccompanied homeless youth after July 1, 2023

*This means that, after July 1, 2023 the above-named 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, 2023.

*This means that, after July 1, 2023, the above-named 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.*

AUTHORIZED SIGNATURE

DATE

PRINTED NAME

TELEPHONE NUMBER

TITLE

AGENCY

Please complete and sign this form, then submit it to our office.

EASTERN ILLINOIS UNIVERSITY
OFFICE OF FINANCIAL AID AND SCHOLARSHIPS
600 LINCOLN AVENUE, CHARLESTON, IL 61920
TELEPHONE: **217-581-6405** FAX: **217-581-6422** EMAIL: **FINAIDVERIFICATION@EIU.EDU**

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Student ID (E Number) Last Name First Name

# 2024-2025 UNACCOMPANIED / HOMELESS YOUTH VERIFICATION FOR FEDERAL FINANCIAL AID

You have indicated that you are a homeless student and therefore must provide documentation.

**OPTION 2:** If you are unable to verify your homeless status with an authorized agency representative, please complete and sign page two of this form AND provide a signed statement from a third-party (clergy, relative, friend) who is not an EIU student and is aware of your housing situation. This statement must include their relationship to you, a phone number and an email address.

You may also provide a brief explanation of your current housing status, but it is not required.

STUDENT SIGNATURE DATE

Complete and sign this form, then submit it to our office in person (Student Services Building East Wing), via email at **finaidverification@eiu.edu** or by fax at 217-581-6422.

EASTERN ILLINOIS UNIVERSITY

**EASTERN ILLINOIS UNIVERSITY**
**OFFICE OF FINANCIAL AID AND SCHOLARSHIPS**
600 LINCOLN AVENUE, CHARLESTON, IL 61920
TELEPHONE: **217-581-6405** FAX: **217-581-6422** EMAIL: **FINAIDVERIFICATION@EIU.EDU**