2021-2022 UNACCOMPANIED YOUTH FORM

You indicated on your financial aid application that at any time on or after July 1, 2020, you were an unaccompanied youth who was homeless, or were self-supporting, and at risk of being homeless.

You must meet the following definitions defined by the McKinney-Vento Homeless Assistance Act (42 U.S.C 11434a)

- **Homeless**-means lacking fixed, regular and adequate housing, which includes living in shelters, motels, or cars, for temporarily living with other people because you had no other place to go
- **Unaccompanied**-means you are not living in the physical custody of your parent or guardian

Complete this form as instructed and sign the Certification Statement. Make sure to include your Sac State student ID is on all documentation submitted.

SECTION I – To be completed by the student – Check ONLY one box

☐ I meet the definition of the McKinney-Vento Act
  Documentation Required:
  - Go to Section II: Have a Verifying Official complete this section; and/or
  - Attach/submit documentation from Verifying Official certifying status

☐ I meet the definition of the McKinney-Vento Act, but I am unable to provide a letter or have a Verifying Official confirm my status
  Documentation Required: Attach a signed statement (provide full names and dates) explaining your living situation as of July 1, 2020

☐ I do not meet the definition of the McKinney-Vento Act, as of the date the financial aid application was signed, but would like to discuss my current living situation. You may ask to speak with a Financial Aid Counselor by contacting the Student Service Center at 916-278-1000, option 2. For additional contact information visit www.csus.edu/ssc.

☐ I do not meet the definition of the McKinney-Vento Act and will provide parental information and signatures on my financial aid application

Once completed upload financial aid documents at [https://onbase.csus.edu/unity/forms/faupload.aspx](https://onbase.csus.edu/unity/forms/faupload.aspx)
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SECTION II – To be completed by Verifying Official

I am a:

☐ McKinney-Vento School District Homeless Liaison

☐ Director or designee of a U.S. Department of Housing and Urban Development (HUD) funded emergency Shelter or transitional program

☐ Director or designee of a runaway or homeless youth basic center or transitional living program funded by the Runaway and Homeless Youth Act (RHYA)

☐ Other designee

I verify that__________________________________________was:

(Print student’s name)

Check one:

☐ An unaccompanied homeless youth on or after July 1, 2020

This means that after July 1, 2020, the student named above 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 risk of being homeless on or after July 1, 2020

This means that after July 1, 2020, the student named above was not in the physical custody of a parent or guardian, provides for his/her own living expenses entirely on their own, and is at risk of being homeless.

As per the College Cost Reduction and Access Act (Public Lay 110-84), I am authorized to verify this student’s living situation. No further verification by the Financial Aid Administrator is necessary.

Name of Verifying Official

Signature of Verifying Official

Title

Agency / Business Name

Office Phone Number

City

State

Zip Code

Date

Certification Statement

I certify that all of the information reported is complete and correct.

Student Signature

Date

Rev. 11/16/20

FYTH - 21/22