

Financial Aid & Scholarships Confluence Building – Room 120 800 Curtis St. Denver, CO 80204 303.556.5503 | financialaid@ccd.edu

2022-2023 UNACCOMPANIED HOMELESS YOUTH

Student Name (print):			
S#:	Phone:		
Student E-mail:			
Note:	Your official CCD email account is the only email CCD will accept for correspondence.		
Stude	ent Signature: Date:		
This form must be completed by the Liaison, Director or Designee who is authorized to verify the student's status. Please indicate your role below (check one):			
\bigcirc	McKinney-Vento School District Homeless Liaison		
\bigcirc	Director or Designee of a HUD-funded shelter or transitional housing program		
\bigcirc	Director or Designee of a RHYA-funded shelter		
0	Financial Aid Administrator		
I, the Liaison, Director or Designee above, verify(print student's name) is (check one):			
\circ	An unaccompanied homeless youth after July 1, 2021. This means that, after July 1, 2021		
	(print student's name) was living in a		
home	less situation, as defined by Section 725 of the McKinney-Vento Act, and was not in the		
physical custody of a parent or guardian.			

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S#:			
An unaccompanied, self-supporting youth at risk of homelessness	after July 1, 2021. This		
means that after July 1, 2021	(print		
student's name) was not in the physical custody of a parent or guardian, provided for their own living			
expenses entirely on their own and was at risk of losing their housing.			
Per the College Cost Reduction and Access Act (Public Law 110-84), I am authorized to verify this student's living situation.			
Authorized Signature:	Date:		
rint Name: Phone Number:			
Title:			
Agency:			

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