

SAMPLE FAFSA VERIFICATION FORM

Verification Letter for Unaccompanied Homeless Youth for the Purposes of Federal Financial Aid

DOB: (Month/Date/Year)
SSN: (###-##-###)
I am providing this letter of verification as the (District Name) McKinney-Vento Homeless Liaison.
As per the College Cost Reduction and Access Act (Public Law 110-84), I am authorized to verify this student's living situation. Should you have additional questions or need more information about this student, please contact me at the number listed below.
This letter is to confirm that (Student's Full Name) was an unaccompanied homeless youth after July 1, (Current School Year).
This means that, after July 1, (Current School Year), (Student's Full Name) 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.
Name (LEA Designated McKinney-Vento Liaison) Title District Address Phone Number Email Address
Signature: Date:



Student Name: (Student's Full Name)