



## 2022-2023 Unaccompanied or Homeless Youth Verification

Financial Aid Office  
1100 E. 14th Street  
PMB A-8  
Ada, Oklahoma 74820  
Phone: 580-559-5243  
Fax: 580-559-5638

### SECTION A: STUDENT INFORMATION (Please Print)

|  |          |               |
|--|----------|---------------|
| Full Name (Last, First, MI.)                           | ECU ID # | Date of Birth |
| Current Mailing Address (If None, Please Write "NONE") |          |               |
|  |          |               |
|  |          |               |

### SECTION B: YOUTH HOUSING INFORMATION (TO BE COMPLETED BY A YOUTH HOUSING OFFICIAL;

|  |   |  |
|--|---|--|
| YOUTH HOUSING OFFICIAL FULL NAME                 | TITLE   | PHONE NUMBER   |
| MAILING ADDRESS                                  |   |  |
|  |   |  |
| AFFILIATION (PLEASE CHECK ONE)                   |   |  |
| <input type="checkbox"/> School District Liaison | <input type="checkbox"/> Director or designee of a HUD-funded shelter | <input type="checkbox"/> Director or designee of a RHYA-funded shelter |

According to the College Cost Reduction and Access Act (Public Law 110-84), I, the official listed above, am authorized to verify the above student's living situation. No further verification by the ECU Financial Aid Office is necessary. Should you have questions or need more information about this student, please contact our office at the number listed above.

### I confirm the following about the student listed above (please check one):

|                          | THE STUDENT IS:   | DEFINITION   |
|--------------------------|---|--|
| <input type="checkbox"/> | An unaccompanied self- youth after July 1, 2021                                   | After July 1, 2021, the 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.                        |
| <input type="checkbox"/> | An unaccompanied self-supporting youth at risk of homelessness after July 1, 2021 | After July 1, 2021, the student was not in the physical custody of a parent or guardian, provides for his or her own living expenses entirely on his or her own and is at risk of losing his or her lodging. |

### SECTION C: CERTIFICATION STATEMENT & SIGNATURES

*I certify that the submitted information is true and correct to the best of my knowledge and belief. If asked by an authorized official, I agree to provide additional proof of the information provided on this form. I understand that purposely providing false or misleading information on this form may result in reduction or repayment of aid, fines and/or imprisonment in this and/or future years.*

|                                  |      |
|----------------------------------|------|
| STUDENT SIGNATURE                | DATE |
|                                  |      |
| YOUTH HOUSING OFFICIAL SIGNATURE | DATE |
|                                  |      |