

2020-2021 HOMELESS UNACCOMPANIED YOUTH VERIFICATION



Please complete and return this form to:

Financial Aid Office
Red Oak Center
P.O. Box 518
Rhineland, WI 54501
715-365-4423 or 800-544-3039
Fax: 715-365-4918
Financial_aid@nicoletcollege.edu

STUDENT INFORMATION:

Student's Last Name	First Name	MI	Nicolet College Student ID Number
Student's Street Address (incl. apt. #)			Student's Nicolet College Email (____)
City	State	Zip Code	Student's Home or Cell Phone Number

If no mailing address for the student listed above, then please provide name, phone number, and mailing address of current contact. _____

I am providing this letter of verification as a (check one):

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

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. Should you have additional questions or need more information about this student, please contact me at the number listed above.

This letter is to confirm that _____ was:
NAME OF STUDENT

Check one:

an unaccompanied homeless youth after July 1, 2019
This means that, after July 1, 2019, _____ 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, 2019.
This means that, after July 1, 2019, _____ 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
Print Name	Telephone Number
Title	
Agency	