

801 Campus Drive Garden City, Kansas 67846 www.gcccks.edu

2023-2024 Unaccompanied Homeless Youth Verification for the Purposes of Federal Financial Aid

Student Name			Student GCCC ID #	
Phone	number (include area code)		Date of Birth	
I am p	providing this verification	on as (check one):		
	A local educational agency homeless liaison, as designated by the <i>McKinney-Vento Homeless Assistance Act</i> (42 U.S.C. 11432(g)(1)(J)(ii)), or a designee of the liaison.			
	The director of an emergency or transitional shelter, street outreach program, homeless youth drop-center, or other program serving individuals who are experiencing homelessness, or a designee of the director.			•
	The director of a Federal TRIO program or a Gaining Early Awareness and Readiness for Undergraduate program (GEAR UP) grant, or a designee of the director.			
	☐ A financial aid administrator at another institution who documented the student's circumstance in the same or a prior award year.			
living s additio	situation. No further verific onal questions or need mo	cation by the Financial Ai re information about this	Law 110-84), I am authorized to verif d Administrator is necessary. Should s student, please contact me at the n	you have
This	completed form con	firms that	(Alama af Charlant)	was:
Check	one:		(Name of Student)	
	This means that, on situation, as defined of a parent or guard An unaccomparafter July 1, 202 in the physical custo	or after July 1, 2022, the I by Section 725 of the Milan. nied, self-supporting 22. This means that, on cody of a parent or guardia	h on or after July 1, 2022: above-named student was living in a cKinney-Vento Act and was not in th g youth at risk of being hom or after July 1, 2022, the above-name an, provides for his/her own living ex	e physical custody eless on or ed student was not
	his/her own, and is a	at risk of losing his/her ho	ousing.	
Author	ized Signature		Date	
Print N	ame		Telephone Number	
			l l	
Title			I	