Arizona Western College
P.O. Box 929 Yuma, AZ 85366
Phone (928) 344-7634
FAX (928) 317-6420

Unaccompanied or Homeless Youth Verification

Section A: Student Information

Full Name (Last, First MI.)	AWC ID#	Phone Number
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) ☐ McKinney-Vento School District Liaison ☐ Director or designee of a HUD-funded shelter ☐ 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 AWC Financial Aid office is necessary.

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

☐	An unaccompanied homeless youth as of: _____ Month/Day/Year	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.
☐	An unaccompanied self-supporting youth as of: _____ Month/Day/Year	The student 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.

Section C: Certification Statement and Signatures

I certify that the submitted information is true & 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

Arizona Western College does not discriminate in admission or access to, or treatment in employment in, its services, programs, or activities on the basis of race, color, national origin, sex, religion, age, or disability.