

Office of Student Aid 314 Shields Building University Park, PA 16802 Phone: (814) 865-6301 Fax: (814) 863-0322 Studentaid.psu.edu

Student Homeless Confirmation

| Stude | nt Name: | PSU ID: |
|--------|---|--|
| | al law allows students under the age of 24 n conditions. You indicated that at a time or | to be considered independent for financial aid purposes under n or after July 1, 2023, you: |
| | Are or were an unaccompanied youth wh Are or were self-supporting and at risk of | |
| | ify this status, you are required to provide e ess or self-supporting and at risk of being I | supporting documentation showing that you are or were nomeless. |
| | te below any agencies that determined tha apporting and at risk of being homeless at a | t you were an unaccompanied youth who was homeless or any time on or after July 1, 2023. |
| Your h | nigh school or school district homeless liais | on? |
| | Yes No | |
| | rector of an emergency shelter or transitioning and Urban Development? | nal housing program funded by the U.S. Department of |
| | Yes No | |
| The d | rector of a runaway or homeless youth bas | sic center or transitional living program? |
| | Yes No | |
| | | |

If you answered "Yes" to any of the above, submit this form along with a copy of the status determination from the agency. Include a brief explanation to clarify the circumstances.

If you answered "No" to all of the above, sign and submit this form. In addition to this form, please complete one of the following:

- 1. Provide your parent(s)' information on your FAFSA, or
- 2. If your situation prevents you from providing parent information on the FAFSA, contact the financial aid staff at your campus to further discuss your situation.

Handwritten student signature required.

By signing this document, I/we certify that all the information reported on it and the is complete and correct. If I/we purposely give false or misleading information on this document, it will be cause for denial or repayment of student aid and I/we may be fined, be sentenced to prison, or both.

| Student Signature: _ | Date: |
|----------------------|-------|
| - | |

Upload your document(s).

Combine all your verification documents into a single file to upload them. For instructions on how to do this or to upload additional files, please visit our <u>website</u>.