



**Solano Community College Financial Aid Office**

4000 Suisun Valley Rd., Rm. 425, Fairfield, CA 94534

Phone (707) 864-7103; Fax (707) 646-2071

[www.solano.edu](http://www.solano.edu)

**2016-2017 FINANCIAL AID VERIFICATION OF HOMELESS STATUS**

**SECTION I (Instructions)**

Students who answered 'yes' on their Free Application for Federal Student Aid (FAFSA) to being homeless must submit documentation to the **Solano Community College Financial Aid Office**, if this is the only criterion which makes a student Independent. This form has been provided to enable students to demonstrate their independent status for financial aid purposes. Acceptable documentation, in lieu of this form, would also be a signed letter (on letterhead) by any of the certifying officials listed in Section III.

**SECTION II (to be completed by Student)**

\_\_\_\_\_  
Last Name                                      First Name                                      M.I.                                      ID#

\_\_\_\_\_  
E-mail Address (if applicable)                                      Phone Number (if applicable)

I hereby authorize the certifying official at \_\_\_\_\_ to release information regarding my homeless status (as of July 1, 2015 or later) to the **Solano Community College Financial Aid Office**.

\_\_\_\_\_  
Student Signature                                      Date

*Attn: Mailed or Faxed copies will not be accepted. Originals must be submitted in person.*

**SECTION III (to be completed by Certifying Agency Official)**

The student above may be eligible for financial aid as an independent student. When validation is complete, please return the form to the **Solano Community College Financial Aid Office, 4000 Suisun Valley Rd., Fairfield, CA 94534**. **Please check only one box (option) and sign below.**

**Youth** means someone who is 21 years of age or younger or is still enrolled in high school as of the day they signed the FAFSA.  
**Unaccompanied** means someone who is not living in the physical custody of their parent or guardian.  
**Homeless** means lacking fixed, regular and adequate housing, which includes living in shelters, motels, cars, or temporarily living with other people because they had nowhere else to go.

Student was determined to be an unaccompanied youth who was homeless (on or after July 1, 2015) **by a high school or high school district homeless liaison**.

Student was determined to be an unaccompanied youth who was homeless (on or after July 1, 2015) **by the director/coordinator of an emergency shelter or transitional housing program funded by the U.S. Department of Housing and Urban Development (HUD)**.

Student was determined to be an unaccompanied youth who was homeless or at risk of being homeless (on or after July 1, 2015) **by the director/coordinator of a runaway or homeless youth basic center or transitional living program**.

\_\_\_\_\_  
Print Name and Title of Certifying Official

\_\_\_\_\_  
Date                                      Phone Number

\_\_\_\_\_  
Signature of Certifying Official

\_\_\_\_\_  
E-mail Address

\_\_\_\_\_  
Certifying Agency



*Certifying Agency Stamp*