UNIVERSITY of NORTH		P.O. Box 1510 One University Drive Pembroke, NC 28372-1510 910-775-4620 (P)		
Office of Financial Aid		910-775-4159 (F) fa@uncp.edu		
2024-202	25 Homeless or Risk of Ho	melessness Verificat	ion	
Name	please print	Banner ID		
	please print			
Bravemail	@bravemail.uncp.edu	Phone		
youth who was homeless	Ily 1, 2023, did your high school or school district hol ? low and forward to your School District's McKinney- Vento	•	n unaccompanied	
of Housing and Urban De	y 1, 2023, did the director of an emergency shelter or to velopment determine that you were an unaccompanie low and forward to the director or designee of a HUD-func	d youth who was homeless?	e U.S. Department	
that you were an unaccom	ly 1, 2023, did the director of a runaway or homeless p npanied youth who was homeless or were self-suppor low and forward to the director or designee of a RHYA-fur	ting and at risk of being homeless?	rogram determine	
You were verified by the UNCP Homeless Liaison that you are an unaccompanied youth who was homeless.				
need to:	homeless or at risk of being homeless. Since you were ur FAFSA by answering "NO" to the homelessness quest		esignations, you will	
	ported on this document is true and accurate. I un awal and/or repayment of financial aid.	derstand that any false statement or m	isrepresentation will	

Student Signature: _____

Date: _____

SECTION B: Must be completed by Homeless Youth Designated Official/or UNCP Homeless Liaison

YOUTH HOUSING OFFICIAL FULL NAME		TITLE	MAILING ADDRESS	
Please Check Your Status:		I confirm the student listed above is (please check one):		
	McKinney-Vento School District Liaison	After July 1, 2023, the student was living in a homeless situation, as defined by Section 725 of the		
	Director or designee of a HUD-funded Shelter	McKinney-Vento Act and was not in the physical custody of a parent or guardian.		
	Director or designee of a RHYA-funded Shelter	After July 1, 2023, the student was not in the p	physical custody of a parent or guardian, provides for	
	UNCP Homeless Liaison	his or her own living expenses entirely on his or her own and is at risk of losing his or her housing.		
PHONE NUMBER:				

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 Financial Aid Administrator is necessary. Should you have questions or need more information about this student, please contact our office at the number listed above.

Signature of Homeless Youth Official /or UNCP Homeless Liaison: _____

Date:_____

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