

Student Financial Aid Office 11400 Robinwood Drive Hagerstown, MD 21742 finaid@hagerstowncc.edu FAX: 301-791-9165

## 2018-2019 Homelessness Form

WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.

Section A1, Student:		
Student Name: HCC ID:		
At any time on or after July 1, 2017, did your high school representative determine that you were an unaccompanied youth who was homeless? (High School Guidance Counselor or Dana Pentoney is the Washington County Public School McKinney-Vento Homeless Youth Liaison)	Yes No	;
At any time on or after July 1, 2017, did the director of an emergency shelter or transitional housing program funded by the U.S. Department of Housing and Urban Development determine that you were an unaccompanied youth who was homeless?	Yes	
At any time on or after July 1, 2017, did the director of a runaway or homeless youth basic center of transitional living program determine that you were an unaccompanied youth who was homeless or were self-supporting and at risk of being homeless?  For a list of transitional housing and homeless shelters, visit: <a href="www.dhr.state.md.us/transit/">www.dhr.state.md.us/transit/</a>	Yes No	1
please be sure to sign the form below.	on B, a	lso,
Section A2:		
Section A2:	to you.	
Section A2: Check the correct answer to the following questions. More than one of these situations may apply	to you.	
Section A2: Check the correct answer to the following questions. More than one of these situations may apply Do you stay in the same place every night?	to you.	
Section A2: Check the correct answer to the following questions. More than one of these situations may apply  Do you stay in the same place every night?  Do you move around a lot?	to you.	
Do you stay in the same place every night?  Do you move around a lot?  Do you have keys to the place where you live?  Do you have the legal right to be in the home where you sleep?	to you.	
Do you stay in the same place every night?  Do you move around a lot?  Do you have keys to the place where you live?	to you. Yes	
Do you stay in the same place every night?  Do you move around a lot?  Do you have keys to the place where you live?  Do you have the legal right to be in the home where you sleep?  Are you or your parent(s) homeless because of an eviction or the inability to pay rent or mortgage?  Are you homeless because of a natural disaster that destroyed your previous home? If yes, when did the	to you. Yes	
Dection A2: Check the correct answer to the following questions. More than one of these situations may apply  Do you stay in the same place every night?  Do you move around a lot?  Do you have keys to the place where you live?  Do you have the legal right to be in the home where you sleep?  Are you or your parent(s) homeless because of an eviction or the inability to pay rent or mortgage?  Are you homeless because of a natural disaster that destroyed your previous home? If yes, when did the disaster occur? Date  Did you or your parent(s) become homeless due to unemployment? If yes, when did you or your parent(s)	to you. Yes	
Do you have keys to the place where you live?  Do you have the legal right to be in the home where you sleep?  Are you or your parent(s) homeless because of an eviction or the inability to pay rent or mortgage?  Are you homeless because of a natural disaster that destroyed your previous home? If yes, when did the disaster occur? Date  Did you or your parent(s) become homeless due to unemployment? If yes, when did you or your parent(s become unemployed? Date  Did you or your parent(s) become homeless when you lost public benefits (Social Security, TANF, etc.)?  If yes, what date did you last receive these benefits?	to you. Yes	

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## **Section B:**

	<b>Student:</b> Take this page to your School District Liaison or Submit page one along with this page to the Financial Aid				
Liaiso	n/Director/Designee Section:				
Please complete this document to verify this student's homelessness status. Please fax it back to our office at 301-791-9165. Thank you.					
I am pr	oviding this letter of verification as a: (Check One)				
	McKinney-Vento School District Liaison				
	Director of designee of a HUD-funded shelter				
	Director or designee of a RHYA-funded shelter				
Per the College Cost Reduction and Access Act (Public Law 110-84), I am authorized to verify this student's living situation.					
I am confirming that the student listed above is or was: (Check One)					
	An unaccompanied homeless youth after July 1, 2017. S/he 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 at risk of homelessness after July 1, 2017. S/he was not in the physical custody of a parent or guardian, provides for his/her own living expenses entirely on his/her own, and was at risk of losing his/her housing.				
Name:	Title:	Phone:			
Signatu	ure:	Date:			

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