



BALTIMORE CITY COMMUNITY COLLEGE

2901 Liberty Heights Ave.

Baltimore, Md. 21215

Phone: 410-462-8500

Unaccompanied Homeless Youth Verification  
For the Purposes of Federal Financial Aid

Name of Student: \_\_\_\_\_

DOB: \_\_\_\_\_ Student's 9-Digit ID#: \_\_\_\_\_

Current Mailing Address of Student (if none, please list name, phone number, and mailing address of current contact): \_\_\_\_\_

I am providing this letter of verification as a (check one):

- A McKinney-Vento School District Liaison
- A director or designee of a HUD-funded shelter: \_\_\_\_\_
- A director or designee of a RHYA-funded shelter: \_\_\_\_\_
- A financial aid administrator: \_\_\_\_\_

As per the College Cost Reduction and Access Act (Public Law 110-84), I am authorized to verify this student's living situation. No further verification by the Financial Aid Administrator is necessary. Should you have additional questions or need more information about this student, please contact me at the number listed above.

This letter is to confirm that \_\_\_\_\_ was an **unaccompanied**, self-supporting youth at risk of homelessness after July 1, 2017. This means that, after July 1, 2017, \_\_\_\_\_ 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.

Authorized Signature	Date
Print Name	Telephone Number
Title	
Agency	

**Please return this form to the Financial Aid Office at BCCC or fax to: 410-462-7444**