

Unaccompanied Homeless Youth

2025-26



Student's Name (Last, First) _____

Student ID Number _____

On your 2025-26 FAFSA, you indicated you were an unaccompanied youth who was homeless or self-supporting and at risk of being homeless at any time on or after July 1, 2024.

Unaccompanied means you are not living in the physical custody of your parent or guardian.

Homeless means you are lacking fixed, regular, and adequate housing. You may be homeless if you live in shelters, parks, motels, hotels, public spaces, campgrounds, cars, abandoned buildings, or are temporarily living with others because you have nowhere else to go. Also, if you are living in any of these situations and fleeing an abusive parent, you may be considered homeless even if your parent would otherwise provide a place to live.

Select the appropriate box indicating the determination of your unaccompanied/homeless situation:

- ☐ My high school or school district homeless liaison determined that I am an unaccompanied youth who was homeless or self-supporting and at risk of being homeless.
- Please attach documentation from a McKinney-Vento School District Liaison or a designee of the liaison.
- ☐ The director of an emergency shelter or transitional housing program funded by the U.S. Department of Housing and Urban Development (HUD) determined that I was an unaccompanied youth who was homeless or was self-supporting and at risk of being homeless.
- Please attach documentation from a director or designee of a HUD-funded shelter.
- ☐ The director of a runaway or homeless youth basic center or transitional living program determined that I was an unaccompanied youth who was homeless or was self-supporting and at risk of being homeless.
- Please attach documentation from a director or designee of a runaway or homeless youth basic center or transitional living program.
- ☐ I **was not** determined to be an unaccompanied youth who was homeless by any of the organizations above, but I am an unaccompanied homeless youth, or unaccompanied, at risk of homelessness, and self-supporting.
- Please attach a signed and dated statement detailing your living situation. A Financial Aid Administrator may contact you in regards to your situation before a final determination can be made.
- ☐ I made an error on my FAFSA. I am not homeless or at risk of being homeless.
- You and your parent(s) **MUST** correct the information on your FAFSA at www.studentaid.gov.

The information provided on this form is true and complete to the best of my knowledge. I understand that purposely giving false or misleading information may result in fines, penalties, and/or reduction or immediate repayment of aid.

Student's Signature _____ Date ____/____/____

Forms can be submitted ONE of the following ways:

Mail to: Enrollment Services/Financial Aid ▪ NDSCS ▪ 800 6th St N ▪ Wahpeton, ND 58076
Drop off at: 101 Haverty Hall (Wahpeton) OR 183G (NDSCS-Fargo)
Contact Us: 1-800-342-4325 or 701-671-2207 | NDSCS.Fin.Aid@ndscs.edu

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