

Student Financial Assistance

G-1 Parker Hall, 300 W. 13th Street Rolla, MO 65409

P: 573/341-4282 F: 573/341-4274

2024-2025 Financial Aid Year Proof of Unaccompanied/Homeless Youth Status

Student Name:	Student ID	Phone #:
	cation for Federal Student Aid (FAFS you must complete this form and turial aid application.	•
Please submit ONE of the following:		
	panied Youth determination from yo	
	panied Youth determination from the by the U.S. Department of Housing a	
A copy of your determina transitional living progra	ation from the director of a runaway	or homeless youth center or a
None of the above situat Financial Services to dis	ions apply to me. I would like to be c scuss options.	contacted by Student
	ions apply to me. I will correct my rend add my parent(s) to the contribute	-
your own living expenses and are	n but believe you are/were an unacco at risk of being homeless, contact yo s liaison, school financial aid office, c ssistance.	ur high school counselor, school
	information on this form is true, act is form to support my request adjust	-
Student's signature:		Date:
Return form to Student Financial A	Assistance	

Rolla, MO 65409-0250 Fax: 573.341.4274

In-person/mail: G-1 Parker Hall

Submit in <u>Joe'SS:</u> Secure Document Upload (QR Code provided)

300 West 13th Street

