



## FINANCIAL AID VERIFICATION OF INDEPENDENT STATUS

### **SECTION I (Instructions)**

Students who answered 'yes' on their Free Application for Federal Student Aid (FAFSA) to being homeless must submit documentation to the **San Diego Mesa College Financial Aid Office**, if this is the only criterion which makes a student Independent. This form has been provided to enable students to demonstrate their independency status for financial aid purposes. Acceptable documentation, in lieu of this form, would also be a signed letter (on letterhead) by any of the certifying officials listed in Section III.

### **SECTION II (to be completed by Student)**

\_\_\_\_\_  
Last Name                      First Name                      M.I.                      CSID

\_\_\_\_\_  
E-mail Address (if applicable)                      Phone Number (if applicable)

I hereby authorize the certifying official at \_\_\_\_\_  
to release information regarding my homeless status (as of July 1, 2009 or later) to the **San Diego Mesa College Financial Aid Office**.

\_\_\_\_\_  
Student Signature                      Date

### **SECTION III (to be completed by Certifying Official)**

The student above may be eligible for financial aid as an independent student. When validation is complete, please return the form to the **San Diego Mesa College Financial Aid Office, 7250 Mesa College Drive, I3-100, San Diego, CA 92111-4998**. Please **check** only one option and sign below.

- Student was determined to be an unaccompanied youth who was homeless (on or after July 1, 2009) **by a high school or high school district homeless liaison.**
- Student was determined to be an unaccompanied youth who was homeless (on or after July 1, 2009) **by the director/coordinator of an emergency shelter or transitional housing program funded by the U.S. department of Housing and Urban Development.**
- Student was determined to be an unaccompanied youth who was homeless or at risk of being homeless (on or after July 1, 2009) **by the director/coordinator of a runaway or homeless youth basic center or transitional living program.**

\_\_\_\_\_  
Print Name of Certifying Official                      Date                      Phone Number

\_\_\_\_\_  
Signature of Certifying Official                      E-mail Address

\_\_\_\_\_  
Title of Certifying Official

