





Office of Student Financial Aid

			C 0 0
Last Name	First Name	M.I.	BRCTC ID number
Phone Number (include area code)			Email Address
homeless, or a must have this	re an unaccompanied youth completed form and any re	providing for you quired document	Aid (FAFSA) that you are an unaccompanied youth who is ur own living expenses who is at risk of being homeless. We ration before we can continue processing your financial aid. at 1-800-308-2145 if you need further assistance.
with other peop you may be con Unaccompanied	ole because you had nowhere e sidered homeless. d—means you are not living in t	lse to go. Also, if yo the physical custody	hich includes living in shelters, motels or cars, or temporarily living ou are living in any of these situations and fleeing an abusive parent y of your parent or guardian lin high school as of the day you sign your FAFSA
Attach Do	A McKinney-Vento School A Director or designee of a A Director or designee of a Documentation must conf You are an unaccompanie living in a homeless situati physical custody of a pare You are an unaccompanie	Liaison HUD-funded she RHYA-funded she irm: d homeless youth on, as defined by nt or guardian, or d, self-supporting u are not in the p	h – This means that, anytime on or after July 1, 2020, you are Section 725 of the McKinney-Vento Act, and are not in the gyouth at risk of homelessness – this means that, anytime physical custody of a parent/guardian, you provide your own
document of homeles I am not homeles represented the description of the document of the docu	etter of explanation if you ca ation, but have other circum ssness. omeless and do not qualify ata.	annot obtain a let estances that qual as an unaccompa on provided above	tter from one of the above – If you cannot obtain lify you as an unaccompanied homeless youth or are at risk anied youth – You must correct your FAFSA and provide lis true and correct to the best of my knowledge. I understand that
Student Signature			Date

To return this form:

Mail: Office of Student Financial Aid

13650 Apple Harvest Drive Martinsburg WV 25403 Fax: 304-260-4376