FLORIDA A&M UNIVERSITY
FINANCIAL AID

Division of Student Affairs
Office of Financial Aid

Telephone: (850) 599-3730
Fax: (850) 561-2730
Email: financialaiddocs@famu.edu

2025-2026 Student Homeless Verification Form

Student Information

Full Name (First, MI, Last): _____

Date of Birth: _____ FAMU ID: _____

Unaccompanied Homeless Youth

At any time on or after July 1, 2024, was the student unaccompanied and either (1) homeless or (2) self-supporting and at risk of being homeless?

☐ Yes ☐ No

If the answer is "Yes," did any of the following determine the student was homeless or at risk of becoming homeless?

Select all that apply:

☐ Director or designee of an emergency or transitional shelter, street outreach program, homeless youth drop-in center, or other program serving that experiencing homelessness.

☐ The student's high school or school district homeless liaison or designee.

☐ Director or designee of a project supported by a federal TRIO or GEAR UP program grant.

☐ Financial Aid Administrator (FAA).

☐ None of these apply.

Certification and Signature

I certify that the submitted information is true and correct to the best of my knowledge. I understand that supporting documentation may be requested by the Office of Financial Aid. I understand that if I do not provide documentation when requested, my financial aid eligibility may be delayed or impacted.

Student Signature: _____ Date: _____
(No Electronic Signatures)