Verification of Homelessness

Student Section: Please PRINT Clearly.

Student Name (Last, First):  
TU I.D. #:  
Phone Number:  
E-mail Address:  

For information on transitional housing and homeless shelters, visit: http://dhr.maryland.gov/blog/?page_id=3907  

At any time on or after July 1, 2019:

- Did your high school district homelessness liaison determine that you were an unaccompanied homeless youth?  
  □ Yes  □ No  
  
- Did the director of an emergency shelter or transitional housing program funded by the U.S. Department of Housing & Urban Development determine that you were an unaccompanied youth who was homeless?  
  □ Yes  □ No  
  
- Did the director of a runaway or homeless youth basic center or transitional living program determine that you were an unaccompanied youth who was homeless or self-supporting and at risk of being homeless?  
  □ Yes  □ No  

- If you checked “Yes” to any of the questions above, sign this form and bring it to one of the appropriate officials listed below.  
- If you checked “No” to all of the questions above, but still think that you may qualify for unaccompanied homeless youth status, please send an email to finaid@towson.edu with the subject line “Unaccompanied Homeless Youth Status Request.” In the email, provide a brief (1-2 paragraph) explanation as to why you believe you are eligible for this status. If you prefer, you may also call 410-704-4236 to schedule an appointment with your advisor.  

I authorize the Liaison/ Director/ Designee to share information about my homelessness determination with Towson University and to e-mail or fax this form to Towson University.  

Student Signature:  
Date:  

Liaison/ Director/ Designee Section: Please complete this document to verify this student’s homelessness status.  

I am authorized to verify this student's status based on my responsibilities as a:  

□ McKinney-Vento School District Liaison  
□ Director or designee of a HUD-funded shelter  
□ Director or designee of a RHYA-funded shelter  

I confirm that after July 1, 2019, the student listed above met the following criteria: (Check one)  

□ As of ___/___/_____, s/he was an unaccompanied homeless youth. S/he was living in a homeless situation, as defined by Section 725 of the McKinney-Vento Act, and was not in the physical custody of a parent or guardian.  

□ As of ___/___/_____, s/he was a self-supporting youth at risk of homelessness. S/he was not in the physical custody of a parent/guardian, provided for his/her own living expenses entirely on his/her own, and was at risk of losing his/her housing.  

Name (Last, First):  
Phone #:  
Title:  
E-mail Address:  
Shelter/School Name, City, and State:  
Signature:  
Date:  

Mail or Fax or In Person  

| Whitney | 410-704-2584 | Enrollment Services Center Room 339  
| Financial Aid Towson University 8000 York Road Towson, MD 21252-0001  
| Monday – Thursday 8:00 – 5:00 Friday 8:00 – 4:30  

Please do not submit forms by email.  

- Please do not call to confirm receipt of faxes.  
- Please wait at least 2 business days.  
- Then check your online To-Do-List.  

Revised: 10/15/19 2020-21 HOMELE