



Office of Financial Aid
26000 SE Stark St, Gresham OR 97030
FinAid.Mail@mhcc.edu
Phone: 503.491.7262
Fax: 503.491.7379

2023-2024 Homeless Verification Form

Student Name: _____ MHCC ID Number: _____

This form is to confirm that the student above was (check one):

- Unaccompanied homeless youth after July 1, 2022.
Unaccompanied, self-supporting youth at risk of homelessness after July 1, 2022.

I am providing this letter of verification as one of the following authorized parties (check at least one):

- A school district homeless liaison
A director or designee of an emergency or transitional shelter, street outreach program, homeless youth drop-in center, or other program serving homeless individuals
A director or designee of a program funded under a TRIO or GEAR UP grant
A financial aid administrator at another institution who previously made a determination of homelessness for this student

As per the College Cost Reduction and Access Act (Public Law 110-84), I am authorized to verify this student's living situation. No further verification by the Financial Aid Administrator is necessary. Should you have additional questions or need more information about this student, please contact me using the information provided below.

Printed Name

Date

Signature

Phone Number

Title

Email Address

Organization Name