



Agnes Scott College
Office of Financial Aid
141 E. College Ave.
Decatur, GA 30030-3770
Phone: 404.471.6395
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2020-2021 Unaccompanied or Homeless Youth Form

On the FAFSA, you answered “yes” to one of the following questions. Please check the box for the situation that applies to you and submit appropriate documentation.

At any time on or after July 1, 2019:

- Did your high school or school district homeless liaison determine that you were an unaccompanied youth who was homeless? (FAFSA question 55)
 - **Please submit official documentation from your high school district homeless liaison documenting this determination.**

- Did the director of an emergency shelter or transitional housing program funded by the U.S. Department of Housing and Urban Development determine that you were an unaccompanied youth who was homeless? (FAFSA question 56)
 - **Please submit official documentation from the director of the shelter or housing program documenting this determination.**

- 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 were self-supporting and at risk of being homeless? (FAFSA question 57)
 - **Please submit official documentation from the director of the basic center or transitional living program documenting this determination.**

- I made an error on my FAFSA. I am not an unaccompanied youth and/or homeless as determined by the person(s) listed above.
 - Yes, I corrected the error on my FAFSA**
 - No, I did not correct the error on my FAFSA. I understand that I must now correct my FAFSA by providing parental information at www.fafsa.ed.gov.**

By signing this document, I acknowledge the following:

- **The information submitted for review is true and correct to the best of my knowledge.**
- **I have read each section and have provided the required documentation.**
- **I understand that providing false information may result in reduced eligibility, repayment of aid, or both.**
- **Additional documentation may be required.**

Student name _____ **ASC ID** _____

Student signature _____ **Date** _____