



2026-2027 Homeless Verification Form

Arkansas Tech's Title IV School Code: 001089

This form must be completed in **blue or black ink** and returned to the Arkansas Tech Financial Aid Office

• Brown Hall, Suite 206 • 105 West O Street • Russellville, AR 72801 • 479.968.0399 • 479.964.0857 (fax) • fa.help@atu.edu •

Note: All notifications of missing information, awards, and general information from the Financial Aid Office will be e-mailed to your OneTech account.

Please print or type

Student ID Number _____ Date of Birth _____ E-mail Address: _____
Month Day Year

Name _____
Last First Middle Maiden (if applicable)

Current Mailing Address of Student

(if none, please list name, phone number, and mailing address of current contact)

Street _____

Student's Phone Number _____

City State Zip Code _____

Alternate Phone Number _____

I am providing this letter of verification as a (choose one of the following):

____ School District Liaison, Name of School: _____

School Mailing Address: _____
Street

City State Zip Code _____

Phone Number: _____

____ Director of Runaway or Homeless Youth Basic Center, Name of Center: _____

Center Mailing Address: _____
Street

City State Zip Code _____

Phone Number: _____

____ Director of an Emergency Shelter program funded by the US Department of Housing that determined student was homeless,

Name of Shelter: _____

Shelter Mailing Address: _____
Street

City State Zip Code _____

Phone Number: _____

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 at the number listed above.

This letter is to confirm that _____ was:

____ An unaccompanied homeless youth after July 1, 2025. This means that, after July 1, 2025, the student listed above 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.

____ An unaccompanied, self-supporting youth at risk of homelessness after July 1, 2025. This means that, after July 1, 2025, the student listed above was not in the physical custody of a parent or guardian, provides entirely for his/her own living expenses, and is at risk of losing his/her housing.

My signature on this form indicates I have read and understood the information on this form and that the information I have provided is true and correct to the best of my knowledge.

Student _____ Date _____

Representative _____ Date _____