



Unaccompanied Youth or Homelessness 2025-2026

Financial Aid Office
Phone: (208) 524-3000 opt. 7
Toll Free: 1-800-662-0261
Fax: (208) 525-7026
financial.aid@cei.edu
1600 S. 25th E. Idaho Falls, Idaho 83404

First Name	Last Name	Student ID/SSN	Phone Number

Your 2025-2026 Free Application for Federal Student Aid (FAFSA) was selected for review in a process called verification. The federal government requires colleges to check the accuracy of the information you provided on your FAFSA. You must complete this worksheet, sign, attach any required documents, and submit the form to the Financial Aid Office before they can establish your eligibility for assistance. If you have questions about verification, contact the Financial Aid Office.

You have applied for federal financial aid as an independent student based on one of the following reasons:

- **"At risk of being homeless"** means when a student's housing may cease to be fixed, regular, and adequate, for example, a student who is being evicted and has been unable to find fixed, regular, and adequate housing.
- **"Homeless"** means lacking fixed, regular, and adequate housing.
- **"Self-supporting"** means when a student pays for his or her own living expenses, including fixed, regular, and adequate housing.
- **"Unaccompanied"** means when a student is not living in the physical custody of a parent or guardian.
- **"Youth"** means you are not yet 24 years of age or you are still enrolled in high school as of the day you signed the [FAFSA](#).

At any time on or after July 1, 2024, you were determined to be an unaccompanied youth who was homeless or were self-supporting and at risk of being homeless with a determination from one of the following entities.

Mark which applies to you below and attach a copy of the determination:

- ☐ A local educational agency homeless liaison (or designee), as designated by the McKinney-Vento Homeless Assistance Act.
- ☐ The director (or designee) of an emergency or transitional shelter, street outreach program, homeless youth drop-in center, or other program serving individuals who are experiencing homelessness.
- ☐ The director (or designee) of a Federal TRIO program or a Gaining Early Awareness and Readiness for Undergraduate program (GEAR UP) grant.
- ☐ A financial aid administrator at another institution who documented the student's circumstance in the same or prior year

Unable to provide listed documentation above: If you cannot provide one of the forms of documentation listed above, please **provide a statement of explanation** of why you should be considered independent based on unaccompanied youth or homelessness. Complete section 1a and 1b; or attach a signed letter of explanation.

Provide **one signed statement from a responsible adult** with knowledge of your situation and can verify your circumstances.

Statement can be from "officials" or community leaders who are in a position to know about your circumstance (e.g. clergy, counselor, mentor, teacher, employer, social worker, doctor, supervisor, employer, lawyer, law enforcement, etc.)

Statements must include: name, address, phone number, job title, relationship to you, and how they are aware of your situation.

Statements must be signed and written on agency/business letterhead or be notarized.

Certifications and Signatures

The person signing this form certifies that all of the information reported is complete and correct. The student whose information was reported on the FAFSA must sign and date.

Student Signature: _____ Date: _____

WARNING: If you purposely give false or misleading information, you may be fined, sent to prison, or both.

Financial Aid Office Use Only	Received By: _____	Date Received: _____	Documentation Received <input type="checkbox"/>
Approved <input type="checkbox"/> Denied <input type="checkbox"/>	Awarded: <input type="checkbox"/>	Date: _____	Email Notification <input type="checkbox"/> Processed By: _____
Comments: _____			

Section 1a: Statement of Explanation

If you cannot provide one of the forms of documentation listed above, please explain why not.

Section 1b: Statement of Explanation

Explain why you should be considered independent based on one of the reasons on the previous page (attach additional pages, if needed).

Student Signature: _____ Date: _____

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