



Student Name (Last, First) _____

Student ID#: _____

2026-27 UNACCOMPANIED HOMELESS YOUTH WORKSHEET

The Office of Student Financial Aid is required to verify the information reported on the Free Application for Federal Student Aid (FAFSA). Our review of your application indicates that additional information is needed to verify your unaccompanied homeless youth status. Processing of your federal aid application cannot continue until you complete and return this worksheet with required documentation attached.

U.S. DEPARTMENT OF EDUCATION DEFINITIONS		
Unaccompanied You are not living in the physical custody of your parent or guardian.		
Homeless	You lack fixed, regular, and adequate housing. You may be homeless if you are living in shelters, parks, motels, hotels, public spaces, camping grounds, cars, or abandoned buildings, or are temporarily living with other people because you have nowhere else to go. Also, if you are living in any of these situations and are fleeing an abusive parent, you may be considered homeless even if your parent would provide support and a place to live.	
DOES THIS APPLY TO ME?		
At any time on or after July 1, 2024, did your high school or school district homeless liaison determine that you were an unaccompanied youth who was homeless, or that you were self supporting and at risk of being homeless?	Yes No	If you answered "yes," attach signed documentation, on official letterhead, from your high school or school district homeless liaison stating that you were an unaccompanied youth who was homeless, or that you were self-supporting and at risk of being homeless.
At any time on or after July 1, 2024, did the director (or designee) of an emergency shelter, transitional housing program, street outreach program, homeless youth drop-in center, or other program serving individuals experiencing homelessness determine that you were an unaccompanied youth who was homeless, or that you were self-supporting and at risk of being homeless?	Yes No	If you answered "yes," attach signed documentation, on official letterhead, from the director or designee of the facility or program stating that you were an unaccompanied youth who was homeless, or that you were self-supporting and at risk of being homeless.
At any time on or after July 1, 2024, did the director (or designee) of a project supported by a federal TRIO or GEAR-UP grant program determine that you were an unaccompanied youth who was homeless, or that you were self supporting and at risk of being homeless?	Yes No	If you answered "yes," attach signed documentation, on official letterhead, from the director or designee of the program stating that you were an unaccompanied youth who was homeless, or that you were self-supporting and at risk of being homeless.
Did a financial aid administrator at another institution in a prior year determine that you were an unaccompanied youth who was homeless, or that you were self-supporting and at risk of being homeless?	Yes No	If you answered "yes," attach your entire Student Aid Report (SAR) from the prior year FAFSA showing your financial aid administrator's determination of your status as a homeless youth (this will be documented in the "Comments About Your Information" page of your Student Aid Report).
At any time on or after July 1, 2024, were you (1) homeless and unaccompanied, or (2) at risk of being homeless, unaccompanied, and providing for your own living expenses, BUT you do not have any of the determinations above?	Yes No	If you answered "yes," contact finaid@sage.edu or call (518) 244-2020 to make an appointment with a financial aid representative.

YOUR HANDWRITTEN SIGNATURE AND DATE ARE REQUIRED BELOW.

ELECTRONIC SIGNATURES ARE NOT ACCEPTABLE ON THIS FORM.

Certification Statement: By signing this worksheet, I certify that all the information reported above, used to determine eligibility for federal student financial aid, is complete and accurate. I understand that I must attach the documentation required above in order to be considered for unaccompanied homeless youth status, and that further documentation may be requested by the Office of Student Financial Aid before a final determination is made.

WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, sentenced to jail, or both.

Name Date **Student's Full Legal**

Date **Student's Signature**

***Upload all pages of this form to
the required documents section of your
My Sage Aid***