



(FINAID - HOMELES)

**Submit the completed form:**

**In Person:** MT One Stop located in the Student Services and Admissions Center (SSAC) – Room 210

**By Mail:** MTSU, MT One Stop, SSAC Room 260, 1301 East Main Street, Murfreesboro, TN 37132

**By Fax:** (615) 904-8423

**Petition for Homeless Status**

**Academic Year 2018-2019**

<b>Name:</b> (Please print) _____	<b>Student ID:</b> <u>M</u> _____
<b>Email Address:</b> _____	<b>Phone:</b> (____) _____

❖ By submitting this form, you are requesting Independent status based on being at-risk of homelessness and can provide the supporting documentation required to be verified.

**Do you qualify as unaccompanied, homeless or at-risk? Please select which category you are requesting be reviewed below:**

- \_\_\_\_\_ Category 1: Physically homeless with no fixed, regular or adequate living condition. Can include unsheltered, sheltered, or exiting an institution.
- \_\_\_\_\_ Category 2: Individuals who will imminently lose primary residence with no subsequent residence, resources or support networks
- \_\_\_\_\_ Category 3: Individuals fleeing or attempting to flee domestic violence or unsafe living conditions with no subsequent residence, resources or support networks
- \_\_\_\_\_ Category 4: Individuals verified by their high school as Unaccompanied before high school graduation

**Required Documentation**

- This form (*fully* completed)
- A typed and signed, detailed letter from you explaining your situation
- Documentation requested based on category (see below)

Documentation required, by category:

- **Category 1: Physically Homeless**
  - Unsheltered (e.g. car, park, abandoned building, camp ground, etc.)  
Certification/Verification from local law enforcement, medical services agencies, outreach service workers, or other third party
  - Sheltered (e.g. emergency/congregate shelters, hotel vouchers, transitional housing)  
Certification/Verification from shelter staff, case workers, or other third party
  - Exiting an Institution (e.g. leaving jail or hospital setting)  
Certification/Verification from institution or other third party of length of stay (must be at minimum 90 days) and previous homeless status prior to entry
- **Category 2: Imminent Risk of Homelessness**
  - Verification of recent or impending eviction- court order, legal quit or cure notice, eviction notice, or other third party.
- **Category 3: Fleeing/Attempting to Flee Violence or Unsafe**
  - Verification by third-party, depending on availability
- **Category 4: Unaccompanied as determined by school**
  - Certification letter from high school staff or county liaison

**Please Note:** All letters provided to verify a student's extreme circumstance should be typed on letterhead, and signed by the person responsible for the content of the letter. Signed letters should generally be from professionals (such as a doctor, minister, or counselor) who are not related to you, unless otherwise specifically stated.

**Please initial to indicate your understanding of the following statements:**

- I understand that additional information may be required after initial documentation is submitted. A full review of my file cannot be completed until I submit all required information and documentation.
- I understand that I must inform my MT One Stop Enrollment Coordinator if my circumstances change for the current year.
- I understand that my FAFSA data may be verified as part of this process.
- I understand that the review process may take 1-2 weeks after I submit all required paperwork.
- I understand I may be required to repay all financial aid received as a result of this process if I falsify information.
- I certify that all information submitted for this petition is true and accurate. I understand that if any information submitted for my petition is false or misleading, I may be fined \$20,000, sent to prison, or both.**

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

**For Office Use Only: Please do not write below this line.**

Documentation provided by/for student:

Notes from verification staff:

As the Next Step Coordinator who works with Foster Care and Homeless students at MTSU, I certify the following for the award year listed:

\_\_\_\_\_ This student is currently homeless or at-risk of homelessness. This request has been approved.

\_\_\_\_\_ This student is not currently homeless or at-risk of homelessness. This request has been denied.

\_\_\_\_\_  
Becca Seul, Next Step Coordinator

\_\_\_\_\_  
Date