



UNIVERSITY OF MARYLAND

OFFICE OF STUDENT FINANCIAL AID

9SHOUSE

0102 Lee Building
College Park, Maryland 20742-5145
TEL: 301.314.9000 & 888.313.2404
TTY: 301.314.7017 (for Hearing impaired)
FAX: 301.405.9265/301.314.9587
www.financialaid.umd.edu
umfinaid@umd.edu

2009-2010 Student Housing Status Form

Student Name: _____ UID: _____

The Office of Student Financial Aid has completed an initial review of your Free Application for Federal Student Aid (FAFSA). Additional information is needed to clarify your housing status. You must answer all questions on this form and provide supporting documentation.

Please submit this form along with supporting documentation to the Office of Student Financial Aid.

1. Are you or were you in legal guardianship as determined by a court in your state of legal residence? If yes, please provide legal documentation. Yes ___ No ___

2. At any time on or after July 1, 2008, did your high school or school district homeless liaison determine that you were an unaccompanied youth who was homeless? If yes, please provide a letter of documentation. Yes ___ No ___

3. At any time on or after July 1, 2008, did the director of an emergency shelter program funded by the U.S. Department of Housing and Urban Development determine that you were an unaccompanied youth who was homeless? If yes, please provide a letter of documentation. Yes ___ No ___

4. At any time on or after July 1, 2008, 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? If yes, please provide a letter of documentation. Yes ___ No ___

5. Are you or were you an emancipated minor as determined by a court in your state of legal residence? If yes, please provide legal documentation. Yes ___ No ___

I certify that the information listed above is correct and complete to the best of my knowledge.

Student's Signature: _____ Date: _____