Homeless/Risk of Being Homeless Worksheet
2020-21

Students twenty-three (23) years old or younger should submit this form if they received a determination at any
time on or after July 1, 2019 that they were an unaccompanied youth who was homeless or at risk of being
homeless. “Homeless” means lacking fixed, regular and adequate housing (e.g., living in shelters, parks, motels,
hotels, public spaces, camping grounds, cars, abandoned buildings, or temporarily living with others because
you have nowhere else to go). If you are living in any of these situations and fleeing an abusive parent, you may
be considered homeless even if your parent would otherwise provide you a place to live. “Unaccompanied”
means you are not living in the physical company of parent or guardian.

To be completed by student (please print):

STUDENT LAST NAME ___________________________ STUDENT FIRST NAME ___________________________
OLE MISS STUDENT NUMBER ________________________

Admission status (please check one): ____ entering freshman ____ continuing UM student ____ new transfer

Before we can determine your eligibility for financial aid, you must establish your Homeless/Risk of
Homelessness status by providing written documentation that verifies one of the conditions indicated below (if
you do not have or cannot acquire documentation of any of these conditions, please contact the Office of
Financial Aid):

1. Any time on or after July 1, 2019, your high school or school district homeless liaison determined
that you were an unaccompanied youth who was homeless or were self-supporting and at risk of
being homeless, OR
2. Any time on or after July 1, 2019, the director of an emergency shelter or transitional housing
program funded by the U.S. Department of Housing and Urban Development determine that you
were an unaccompanied youth who was homeless or were self-supporting and at risk of being
homeless, OR
3. Any time on or after July 1, 2019, the director of a runaway or homeless youth basic center or
transitional living program determined that you were an unaccompanied youth who was
homeless or were self-supporting and at risk of being homeless.

By signing below, I certify that the information provided is true and correct. I also agree to provide additional
information or documentation if requested.

Student Signature: ___________________________________________ Date: ______________________

FOR OFFICE USE ONLY
FAFSA corrections submitted on Transaction # _____ EFC_____ Date: ____/___/____ Initials:____
FAFSA corrections confirmed on Transaction # _____ EFC_____ Date: ____/___/____ Initials:____