

# 2026-2027 Unaccompanied/Self-Supporting Youth-Homeless



Financial Aid Office

Student ID #	
Last Name	
First Name	
Telephone #	

On your 2026-2027 financial aid application, you indicated that at any time since July 1, 2025, you were an unaccompanied youth who was homeless or were self-supporting and at risk of being homeless.

If you have any questions, on how to complete this form or what you need to submit, contact Financial Aid at 701-228-5440.

***Unaccompanied youth- means you are 21 to 24 years of age or younger or still enrolled in high school, and not living in the physical custody of your parent or guardian.***

***Homeless- means lacking a fixed, regular and adequate nighttime residence. You may be homeless if you are living in shelters, parks, motels or cars, or temporarily living with other people because you have nowhere else to go. Also, if you are living in any of these situations and fleeing an abusive parent, you may be considered homeless even if your parent would provide support and a place to live.***

**At any time since July 1, 2025, did you lack a fixed (stationary and permanent), regular (predictable and consistent) or adequate (sufficient to meet your physical and psychological needs) housing?  No  Yes**

***If you checked “no”, your FAFSA will need to be corrected at [www.fafsa.gov](http://www.fafsa.gov), under the Dependency Status Tab, and you will be considered a dependent student. This will require you to provide parental information, including financial, household size and number in college.***

***If you checked “yes”, please mark which situation applies to you, and write a statement to attach to this form giving at least two specific examples of abuse that you experienced while living with your parent(s):***

- You were fleeing an abusive parent, even though your parent may have been willing to provide a place for you to live. We define “abusive” as:
- Insulting: intended to insult or offend somebody;
  - Harmful: involving physical, psychological, or sexual maltreatment; or
  - Wrongful: involving illegal, improper, or harmful activities.

Please write a statement to attach to this form giving at least two specific examples of abuse that you experienced while living with your parent(s).

- You stayed with other people because you had nowhere else to go.  
Who did you stay with and what was your relationship to them? \_\_\_\_\_
- You stayed in sub-standard housing (i.e. didn’t meet local building codes, abandoned buildings, utilities were turned off, etc.).  
List the location (address, city, and state) \_\_\_\_\_
- You stayed in emergency/ transitional shelter such as FEMA trailer, Salvation Army, Church or other designated shelters.  
List type of shelter and where was it located (city/state) \_\_\_\_\_
- You stayed in motels, camp grounds, cars, bus/train station or public place not designed for humans to live.  
Where specifically (including cities/states)? \_\_\_\_\_
- You lived in the school dormitory or self-paid housing (i.e. apartment), because you would otherwise be homeless.

Submit one of the acceptable documentation (listed below) along with this form. Documentation must include your name, the dates in which you were homeless or at risk of being homeless, and specific information that confirms you meet the definition of an unaccompanied youth who was homeless or self-supporting and at risk of being homeless. Forms submitted without one of the documents below will not be processed.

- Signed form or letter from the director or designee of an emergency shelter program funded by the Department of Housing and Urban Development (HUD)
  - Signed form or letter from the director or designee of a runaway or homeless youth basic center or transitional living program
  - Signed form or letter from state homeless education coordinator or the National Center for Homeless Education
  - Signed form or letter from private or publicly funded homeless shelter or service provider
  - Signed form or letter from director of college access program such as TRIO or GEAR UP who is familiar with your
  - Signed form or letter from your high school counselor who is familiar with your situation
  - Signed letter from a mental health professional, social worker, clergy member or doctor who is familiar with your situation
  - Signed form or letter from any recognized McKinney-Vento practitioner
- I do not have any of the documentation listed above. If you check this box you will need to schedule an appointment/interview with JaLee at 701-228-5440 to determine whether you meet the guidelines to be considered homeless.

To ensure timely processing of your aid, we suggest that you submit this form to the address below **within 2 weeks**. Your financial aid will be on hold until the Verification process is complete. Upon review of this form and the required documentation, including **ALL** Verification documents, we will update the status of your financial aid. Forms must be turned in 45 days before the end of fall/spring semester and 20 days before the end of summer semester.

***The information provided on this form is true and complete to the best of my knowledge. I understand that purposely giving false or misleading information may result in fines, penalties, and/or reduction or immediate repayment of aid.***

***I understand the information provided on this form may affect my financial aid.***

**Student Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Note: Unsigned documents will be returned. This form must be signed with a physical signature. Typed names or electric signatures are not acceptable.**

**Forms can be submitted in one of the following ways:**

- Mail to: Dakota College at Bottineau, Financial Aid Office, 105 Simrall Blvd, Bottineau, ND 58318
  - Drop off: Dakota College at Bottineau, Student Services, Thatcher Hall 210
    - Request Secure link: [fa@dakotacollege.edu](mailto:fa@dakotacollege.edu)

If you have additional questions: Phone: (701) 228-5440 or email [fa@dakotacollege.edu](mailto:fa@dakotacollege.edu)