University of Illinois Springfield – Office of Financial Assistance
One University Plaza, MS UHB 1015 -- Springfield, Illinois 62703-5407 -- Phone: (217) 206-6724

https://www.uis.edu/cost-aid/financial-aid

2022-2023 Homeless Confirmation Form

For Priority Processing Submit Form within 15 business days

Section A – Student Information	(Please	print clear	·ly)
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Last Name	First Name	M.I.		Email	
Street Address		City	State	Zip Code	
 Submit an 8 ½ Please upload Please make 	s entire worksheet. You m ½ x 11 legible copy of docu d all documents at the sam sure to include your UIN o	umentation requested. ne time. on all documents.		n must be <u>SIGNED</u> .	
Section B - H	omeless Confirmation	on			
	i, 57, and 58 on your Stude ov. You will need your FSA		You may access a	copy of your SAR via	
2. According to you	ır homeless status, please	check the document	you have attached	to this form. Submit one only.	
una Let Del una Let det sup	accompanied youth who we ter form the director of an partment of Housing and Laccompanied youth who we -OR- ter from a director of a run ermination that you were a oporting and at risk of being tudent Signature	as homeless on or after emergency shelter or Jrban Development wi as homeless on or after away or homeless you an unaccompanied you g homeless on or after	er July 1, 2021. transitional housing th the determination er July 1, 2021. uth basic center or to the who was homel or July 1, 2021.	transitional living program with	h the
	ad this form and suppor al Aid tab. When submitti		to Enterprise Self-	Service Student Requireme	ents
		ies made on 8 ½ x 1½ printed within the boate signatures.			
I certify that the info	ormation provided on this fo	orm and any attachme	ents are true and co	rrect.	
Student Signature		Date			
ENTER YOUR	9-DIGIT UIN .				
2223 H	HOME-O N			\prod	