

## HOUSEHOLD STUDENT STATUS VERIFICATION

Applicant/Tenant Name: \_\_\_\_\_ Unit#: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

**Will any of the persons in your household be or have been full-time students during five calendar months of the certification year?**  Yes  No

**If YES, then is anyone in your household:**

- A student and receiving TANF?  Yes  No
- A student who was previously in a foster care program under Part B or Part E of Title IV of the Social Security Act?  Yes  No
- A student enrolled in a job training program under the Workforce Investment Act (federal, state or local)?  Yes  No
- A single parent living with his/her minor children and such parent is not a dependent (as defined in Section 152) and whose children are not dependents of another individual other than a parent?  Yes  No
- Married and file a joint return?  Yes  No

I agree to notify management immediately if my student status changes. I understand that changes in student status may affect my eligibility to participate in this Program.

I hereby certify that the information provided above is accurate and complete to the best of my knowledge. I consent to release such information in order to comply with Program regulations. I understand that providing false or misleading information may subject me to criminal penalties.

\_\_\_\_\_  
(Signature of Tenant)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Signature of Co-Tenant)

\_\_\_\_\_  
(Date)

Section 1001 of Title 18 of the U.S. Code makes it a criminal offense to make willful false statements or misrepresentations to any Department or Agency of the United States as to any matter within its jurisdiction.

