

# STUDENT CERTIFICATION

## THIS SECTION TO BE COMPLETED BY STUDENT

This Student Certification is being delivered in connection with the undersigned's eligibility for residency in the following apartment:

Project Name: \_\_\_\_\_

Building Address: \_\_\_\_\_

Unit Number: \_\_\_\_\_

**I hereby grant disclosure of the information requested below.**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Student ID#

**Return Form to:**

## THIS SECTION TO BE COMPLETED BY EDUCATIONAL INSTITUTION

The above-named individual has applied for residency or is currently residing in a Housing Tax Credit Development. Federal regulations (IRS Code Section 42) require the housing owner to annually verify all information used in determining this person's eligibility. Please provide the information requested below:

**Is the above-named individual a student at this educational institution?    YES    NO**

**If so, part-time or full-time?    PART-TIME    FULL-TIME**

**If full-time, the date the student enrolled as such: \_\_\_\_\_**

**If full-time, was it in any part of 5 (not necessarily consecutive) months during this calendar year?    YES    NO**

**If YES, which months? \_\_\_\_\_**

**Expected date of graduation: \_\_\_\_\_**

I hereby certify that the information supplied in this section is true and complete to the best of my knowledge.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Print your name: \_\_\_\_\_

Tel. #: \_\_\_\_\_

Title: \_\_\_\_\_

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**Note:** 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.