

### Certification of Student Status

Resident Name: \_\_\_\_\_

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

Move-in Date: \_\_\_\_\_  
(MM/DD/YYYY)

Students include individuals attending public or private elementary schools, middle or junior high schools, senior high schools, colleges, universities, technical, trade, or mechanical schools. Students do not include individuals participating in on-the-job training or correspondence courses.

Please choose the option below that best describes your situation:

- I am not a full time student and I have not been a student for **five months or more out of the current calendar year.**
- The household contains at least one occupant who is not a student and has not been *and/or* will not be a student for five months or more out of the current calendar year (*months need not be consecutive*). Name of occupant(s) who are **not** student(s) \_\_\_\_\_
- The household contains all students, but is qualified because at least one occupant is a part time student. Please list the names of all part time students: \_\_\_\_\_  
**Verification of part time student status is required for at least one occupant.**
- The household contains all full time students for five months or more out of the current and/or upcoming calendar year (*months need not be consecutive*). Please answer questions 1-5 below:

	<b>Yes</b>	<b>No</b>
1. Are the students married and entitled to file a joint tax return? (attach an affidavit or tax return)	<input type="checkbox"/>	<input type="checkbox"/>
2. Is at least one student is a single parent with child(ren), <i>and</i> this parent is not a dependent of someone else, <i>and</i> the child(ren) is/are not dependent(s) of someone other than parent(s)?	<input type="checkbox"/>	<input type="checkbox"/>
3. Is at least one student receiving Temporary Assistance to Needy Families (TANF)?	<input type="checkbox"/>	<input type="checkbox"/>
4. Does at least one student participate in a program receiving assistance under the Job Training Partnership Act, Workforce Investment Act, or under other similar federal, state, or local laws? (attach verification of participation)	<input type="checkbox"/>	<input type="checkbox"/>
5. Does the household consist of at least one student who was previously under foster care? (provide verification of participation)	<input type="checkbox"/>	<input type="checkbox"/>

Under penalties of perjury, I/we certify that the information presented in this certification is true and accurate to the best of my/our knowledge and belief. I/we agree to notify management immediately of any changes in this household's student status. I/we understand that providing false representations constitutes an act of fraud. False, misleading, or incomplete information may result in the termination of the lease agreement.

**A separate form needs to be signed by each household member age 18 or older.**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date