



EACH ADULT HOUSEHOLD MEMBER OVER 18 MUST COMPLETE THIS FORM.

ONE (1) FORM PER EACH ADULT.

Applicant/Resident Name: _____ Unit No. _____

Development Name: _____ City: _____

You have applied to live in an apartment that is governed by one or more Federal and/or state housing programs. These Programs have restrictions on full-time students and requires us to determine student status. We must determine this prior to granting your eligibility and, if such eligibility is granted, each subsequent year you remain in the unit. Students include those attending public or private elementary schools, middle or junior high schools, colleges, universities, technical, trade or mechanical schools, but does not include those attending on-the-job training courses.

SECTION 42 LIHTC PROGRAM

Yes No Are ALL members of the household FULL-TIME students or have been full-time students during five calendar months of this year, or the upcoming year (months need not be consecutive)?

Yes No Are you a part-time student?
If you answered yes to either of the above, please fill out a student status aid verification form.

Yes No Are you married and filing a joint tax return? *Please provide: A signed copy of most recent tax return and copy of marriage license required.*

Yes No Are you currently receiving AFDC/TANF? *Please provide: A third-party verification of AFDC/TANF.*

Yes No Are you enrolled in a federal, state or local job training program under the Job Training Partnership Act (JTPA)? *PLEASE PROVIDE: A VERIFICATION OF ENROLLMENT & MISSION STATEMENT OF THE PROGRAM IF NOT JTPA.*

Yes No Are you a single parent household with children and none of the household members are dependents on anyone else's tax return? *Please provide: A signed copy of most recent tax return.*

Yes No Were you previously under the care and placement of the State agency responsible for administering part B or Part E of Title IV? *Please provide: Foster care documentation.*

Under penalty of perjury, I certify that the information presented in this certification is true and accurate to the best of my knowledge. The undersigned further understand(s) that providing false representations herein constitutes an act of fraud. False, misleading or incomplete information may result in the termination of a lease agreement.

Signature of Applicant/Tenant

Printed Name of Applicant/Tenant

Date

Title 18, Section 1001 of the U.S. Code states that a person is guilty of a felony for knowingly and willingly making false or fraudulent statements to any department of the United States Government. HUD, the PHA and any owner (or an employee of HUD, the PHA or the owner) may be subject to penalties for unauthorized disclosures or improper uses of information collected based on the consent form. Use of the information collected based on this verification form is restricted to the purposes cited above. Any person who knowingly or willingly requests, obtains or discloses any information under false pretenses concerning an applicant or participant may be subject to a misdemeanor and fined not more than \$5,000. Any applicant or participant affected by negligent disclosure of information may bring civil action for damages, and seek other relief, as may be appropriate, against the officer or employee of HUD, the PHA or the owner responsible for the unauthorized disclosure or improper use. Penalty provisions for misusing the social security number are contained in the Social Security Act at 42 u.s.c. 208 (f) (g) and (h). Violation of these provisions are cited as violations of 42 u.s.c. 408 f, g and h.

PM-211C