

TO BE COMPLETED BY ALL APPLICANTS/TENANTS 18 AND OVER

Applicant/Tenant: _____

Have you, are you or will you be a student this calendar year? (HUD/HOME, LIHTC) Yes No

"Student" includes those attending public or private elementary schools, middle or junior high schools, senior high schools, colleges, universities, technical, trade, or mechanical schools, but does not include those attending on-the-job training courses or those pursuing a GED. **If you are not sure, please mark "yes" and the property management company will verify your student status, as well as any exceptions that you claim.**

If you answered NO, please skip the following questions and sign below.

If you answered Yes, please complete the following questions:

- | | Yes | No |
|--|--------------------------|--------------------------|
| 1. Are you a full-time student? (Will you or have you attended school for five months or more this calendar year with a full-time status? The months do not need to be consecutive.) | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Are you married? (HUD/HOME, LIHTC) | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Are you a single parent with a child(ren)? | <input type="checkbox"/> | <input type="checkbox"/> |
| If yes: | | |
| a. Are you a dependent of someone else? (LIHTC) | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Is your child(ren) a dependent of someone other than a parent? (LIHTC) | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Are you receiving assistance under Title IV of the Social Security Act (e.g.TANF)? (LIHTC) | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Are you enrolled in a government-sponsored job training program (e.g. Job Corp, AmeriCorp)? (LIHTC) | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Were you previously in foster care at any time through the age of 18? (LIHTC) | <input type="checkbox"/> | <input type="checkbox"/> |

The following questions apply only to households applying for/assisted by a HUD or HOME program. If you are not applying for/assisted by a HUD or HOME program, please skip the remaining questions and sign below.

- | | | |
|--|--------------------------|--------------------------|
| 7. Are you disabled? | <input type="checkbox"/> | <input type="checkbox"/> |
| If yes, were you receiving Section 8 assistance as of November 30, 2005? | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. Are you over 23 years of age? | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. Do you have a dependent child(ren)? | <input type="checkbox"/> | <input type="checkbox"/> |
| If yes, does your child(ren) live with you at least 50% of the time? | <input type="checkbox"/> | <input type="checkbox"/> |
| 10. Are you a veteran of the Armed Forces of the United States or currently serving on active duty in the Armed Forces other than training purposes? | <input type="checkbox"/> | <input type="checkbox"/> |
| 11. Will you be living with your parents? | <input type="checkbox"/> | <input type="checkbox"/> |
| a. Are your parents receiving or eligible to receive Section 8 assistance? | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Are you claimed as a dependent on your parent's tax return? | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Do you receive financial assistance from your parents? | <input type="checkbox"/> | <input type="checkbox"/> |
| 12. Have you established a household separate from parents or legal guardians for at least one year prior to application for occupancy? | <input type="checkbox"/> | <input type="checkbox"/> |
| If no: | | |
| a. Were you an orphan or a ward of the court through age 18? | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Are you a graduate or professional student? | <input type="checkbox"/> | <input type="checkbox"/> |
| 13. Are you receiving any financial aid to pay for your education? | <input type="checkbox"/> | <input type="checkbox"/> |

Owner/owner agent is responsible for reviewing [Student Independence Verification Requirements](#).

Signature _____

Date _____

Under penalty of perjury, I certify that the information provided herein is true and accurate to the best of my knowledge. The undersigned further understands that providing false representation herein constitutes fraud. False, misleading or incomplete information may result in the termination of the application or lease agreement.

