Instructions: Each applicant for or household member in a HOME-assisted unit who is age 18-23 (or under 18 and treated as Head, Co-head, or Spouse) must complete, sign and date an Annual Student Certification at move-in and then annually during the HOME Affordability Period.

Applicant/Tenant Information

Applicant/Tenant Name: ____________________________

Property Name: ____________________________ Unit #: ____________

You have applied for or currently reside in a rental housing unit located in a development that received financing under the U.S. Department of Housing and Urban Development (HUD) HOME Investment Partnership Program (HOME Program). The HOME Program requires that we verify all of your income and assets, as well as other claims of eligibility, including student eligibility. Even if your household is income-eligible, you are not eligible to reside in a HOME-assisted unit if you are enrolled either part-time or full-time in an institution of higher education and do not meet at least one eligibility exception in Part B, C or D. Supporting documentation may be required. Institutions of higher education include accredited post-secondary vocational or community colleges, colleges or universities, or any other accredited for-profit or nonprofit institution of higher education that prepares students for gainful employment in a recognized occupation.

PART A: STUDENT STATUS

I am enrolled or planning to enroll in an institution of higher education. ☐ Yes ☐ No

If you checked “No” STOP Skip Parts B, C and D but complete Part E. If you checked “Yes,” complete Part B.

PART B: ELIGIBLE STUDENT

I live or will live with my parent(s) or legal guardian in this unit. ☐ Yes ☐ No

If you checked “Yes” STOP Skip Parts C and D but complete Part E. If you checked “No,” complete Part C.

PART C: ELIGIBLE INDEPENDENT STUDENT (supporting documentation is required)

Section 1:
1. I have established a separate household from my parent(s)/legal guardian for at least one full year. ☐ Yes ☐ No
2. My parent(s)/legal guardian claimed me as a dependent on their most recent tax return. ☐ Yes ☐ No

If you checked “Yes” to #1 and “No” to #2 STOP Skip Section 2 and Part D but complete Part E. Otherwise, complete Section 2.

Section 2:
1. I will be age 24 by December 31 of this year. ☐ Yes ☐ No
2. I am legally married. ☐ Yes ☐ No
3. I am a graduate or professional student (working on a master’s or doctorate degree such as M.A., M.B.A., Ph.D.) ☐ Yes ☐ No
4. I am a veteran of the U.S. Armed Forces or am on active duty for other than training purposes. ☐ Yes ☐ No
5. I am disabled and receiving Section 8 assistance since 11/30/2005 ☐ Yes ☐ No
6. I have a legal dependent (child or parent). [□ Yes □ No]

7. I was an orphan, in foster care, or a dependent/ward of the court after age 12. [□ Yes □ No]

8. I am homeless or self-supporting but at risk of being homeless. This can be verified by:
   □ My high school or district homeless liaison
   □ The director or an emergency shelter or transitional housing program funded by HUD
   □ The director of a runaway or homeless youth basic center or transitional living program

   *If you checked “Yes” to any statement in Section 2, [□]. Skip Part D but Complete Part E. Otherwise, complete Part D.*

**PART D: ELIGIBLE DEPENDENT STUDENT**

I am income eligible for Section 8 assistance, and my parents are income eligible for Section 8 assistance. [□ Yes □ No]

*If you checked “Yes,” your parent’s income must also be verified. Complete Part E.*

*If you checked “No,” [□]. Do not complete Part E; you are not eligible to live in a HOME-assisted unit.*

**PART E: CERTIFICATION AND SIGNATURE**

Under penalty of perjury, I certify that the information presented in this certification is true and accurate. I agree to notify management immediately of any change in my student status or if I no longer meet at least one exception. I understand that providing false or misleading information constitutes an act of fraud and may result in the termination of my lease agreement.

________________________
Signature of Applicant/Tenant

________________________
Printed Name of Applicant/Tenant

________________________
Date

**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.