STUDENT STATUS AFFIDAVIT

THIS FORM IS FOR HOME/NSP/HTF ONLY. NOT FOR USE ON HOUSEHOLDS IN TAX CREDIT UNITS.

Each Household member who is 18 or older must sign this form

 Applicant/Resident Name ___________________________ Date _______________________

Are you a student who enrolled as either a part time or full time student at an institute of higher education for the purpose of obtaining a degree, certificate, or other program leading to a recognized educational credential?  
  Yes  No

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

If you answered yes, please complete the following questions:

1. Are you a graduate or professional student?  
   YES  NO

2. Are you disabled?  
   If yes, were you receiving Section 8 assistance as of November 30, 2005  
   YES  NO

3. Are you at least 24 years of age?  
   YES  NO

4. Are you a veteran of the United States military?  
   YES  NO

5. Are you married?  
   YES  NO

6. Do you have a dependent child?  
   YES  NO

7. Will you be living with your parents?  
   If no:  Are your parents receiving or eligible to receive Section 8 assistance?  
   Are you claimed as a dependent on your parent’s tax return?  
   YES  NO

8. Are you classified as a Vulnerable Youth?  
   YES  NO

A student meets HUD’s Definition of vulnerable youth when:

a) The individual is an orphan, in foster care, or a ward of the court or was an orphan, in foster care, or a ward of the court at any time when the individual was 13 years of age or older;

b) The individual is, or was immediately prior to attaining the age of majority, an emancipated minor or in legal guardianship as determined by a court of competent jurisdiction in the individual’s State of legal residence;

c) The individual has been verified during the school year in which the application is submitted as either an unaccompanied youth who is a homeless child or youth (as such terms are defined in section 725 of the McKinney-Vento Homeless Assistance Act) or as unaccompanied, at risk of homelessness.

10. Are you receiving any financial assistance to pay for your education?  
    If yes, please list the sources of financial assistance:

    ________________________________________________________________

    ________________________________________________________________

PENALTIES FOR MISUSING THIS CONSENT: 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 and any owner (or any employee of HUD 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 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 208(a) (6), (7) and (8). Violations of these provisions are cited as violations of 42 U.S.C. 408 (a) (6), (7) and (8).

Signature of Applicant/Resident: ___________________________ Date: _______________