Idaho Housing and Finance Association

CERTIFICATION OF STUDENT STATUS
TAX CREDIT

Head of Household Name: _____ **Unit Number:** _____

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

PLEASE CHOOSE THE ONE OPTION BELOW THAT BEST DESCRIBES YOUR HOUSEHOLD

☐ There are **no** full-time or part-time students in this household.

☐ There is **at least one household member who has not been and will not be a student** for five months (can be nonconsecutive) or more of the current and/or upcoming calendar year.

Name of non-student: _____

☐ **All household members are students**, but at least one member is not a student more than **part-time**.

Name of part-time student: _____

Provide verification of part-time status.

☐ **All household members have been or will be full-time students** at least five months (can be nonconsecutive) of the current/upcoming calendar year.

If this option is selected, ALL five of the following questions must be answered.

1. Are all adult students married and entitled to file a joint tax return? ☐ Yes ☐ No
   Provide marriage certificate or joint tax return.
2. Are all adult students single parents with minor children? ☐ Yes ☐ No
   Adult students cannot be dependents of someone else and the minor children can only be claimed by a parent. Provide tax return.
3. Is any student receiving Temporary Assistance to Needy Families (TANF)? ☐ Yes ☐ No
   Provide TANF award letter or third-party verification.
4. Is any student a former recipient of foster care assistance? ☐ Yes ☐ No
   Provide foster care paperwork from welfare agency.
5. Does any student get assistance from Job Training Partnership Act or similar program? ☐ Yes ☐ No
   A similar program must receive federal, state, or local government funding and have a mission similar to Job Training Partnership.

Under penalty 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 the household's student status. I/we understand that providing false representations constitutes an act of fraud. False, misleading, or incomplete information may result in termination of the lease agreement.

This form must be signed by every household member aged 18 or older.

Signature	Date	Signature	Date
Signature	Date	Signature	Date

Clear Form

Revised September 2025