SCHOOL VERIFICATION

This form is acceptable for both City of Lansing, and MSHDA projects.

Name of Property Owner and/or Tenant: _____

Property Address: _____ Unit #:_____

This section to be completed by the Student

Regulations require the City of Lansing Development Office to verify the student status of household members 18 years of age or older for determining household eligibility for federally funded housing programs. All information will be held in confidence and will be used only for program purposes.

I grant the City of Lansing Development Office permission to make inquiries regarding my student status and financial aid information. I understand that this information will be kept confidential and will be used only for program purposes.

Type or Print Student's Name:	Social Security Number:	Student Number:

_____ _____

Student's Signature Date

This section to be completed by the Student's School

1. Type or print student's name:		
2. Full-time Student? ☐ No ☐ Yes	3. Part-time Student? ☐ No ☐ Yes	4. Is student enrolled for the summer months? ☐ No ☐ Yes
5. Student's course of study:	6. Date of enrollment:	7. Anticipated completion date:
8. Does the student pay for medical insurance? ☐ No ☐ Yes	8b. How much is paid? $	8c. How often is it paid?

I certify that this student is enrolled in this school and understand that any action to deceive, including any false statement or representation; or the fraudulent obtaining of money, real or personal property; or the fraudulent use of an instrument, facility, article, or valuable thing or service used to assist a participant in any federally funded program is punishable by imprisonment and/or a fine.

Name of School:

Street Address:	State:	Zip Code:
Type or print name of Authorized Representative:	Title of Authorized Representative:	Telephone Number: ( )

_____ _____

Authorized Representative's Signature Date

Please return completed form to:

COL-05 (5/03)
Modified MSHDA-55 (6/95)