

MICHIGAN STATE HOUSING DEVELOPMENT AUTHORITY

ANNUAL STUDENT ELIGIBILITY CERTIFICATION

(For LIHTC and Bond-Financed Projects)

This form must be completed for all households in which any of the occupants are students, either full-time or part-time. All household members age 18 or older (or if under 18 and qualified as Head, Co-Head, or Spouse) must complete, sign and date this form upon move-in and at least annually thereafter or whenever there is a change in student status during the entire compliance period of the project.

Household Name:	Unit Number:
Development Name:	

	Name of Household Member	Currently a Student	If not currently a student, was the member a student at any time during the current calendar year?
Head		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
2		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
3		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
4		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
5		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
6		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A

- A. At least one household member (_____) is currently a **non-student** and has not been (and will not be) a student during any part of any five different months of the calendar year.¹ A **Student Status Verification** form must be completed if this individual attended school at any time during the past twelve months.
- B. Household contains all students but is qualified because the following occupant (_____) is currently a **part-time student** and this part-time student has not been (and will not be) a full-time student during any part of any five months (consecutive or different) of the calendar year. A **Student Status Verification form** is required for the part-time student.
- C. Household contains all full-time students but is qualified because the household meets one or more of the exceptions provided in IRC Section 42 and listed below.
- At least one student is receiving assistance under Title IV of the Social Security Act (i.e., welfare, AFDC, TANF, etc.) Yes No Program:
 - At least one student was previously under the care and placement responsibility of the state agency responsible for administering foster care. If yes, attach documentation of previous foster care participation. Yes No
 - At least one student participates in a program receiving assistance under the Job Training Partnership Act, Workforce Investment Act, or under other similar federal, state, or local laws (i.e., Housing Reconnect Program). If yes, attach documentation of current participation.
 Yes, Program Name: No
 - At least one household member (who is not themselves a dependent of anyone) is a single parent with their own dependent child(ren) who are not dependent(s) of anyone else other than the other non-custodial parent. If yes, attach documentation such as a tax form or statement.
 Yes No Explanation:
 - At least one student is married and entitled to file a joint tax return. If yes, attach a copy of the marriage license or the most recently filed tax return.
 Yes No Document Attached:

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. I/we agree to notify management immediately of any changes in this household's student status. The undersigned further understand(s) that providing false representations herein constitutes an act of fraud. False, misleading or incomplete information may result in the termination of a lease agreement.

Signature of Applicant/Resident Printed Name of Applicant/Tenant Date

Signature of Applicant/Resident 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.

ⁱ Note: The five months need not be consecutive. If the individual attended school full-time for even one day of a calendar month, that month counts toward the five months.