

**STUDENT VERIFICATION  
TC-100 A**

**THIS SECTION TO BE COMPLETED BY MANAGEMENT AND EXECUTED BY STUDENT**

This Student Verification is being delivered in connection with the undersigned's eligibility for residency in the following apartment:

Project Name: \_\_\_\_\_

Building Address: \_\_\_\_\_

Unit Number if assigned: \_\_\_\_\_

**I hereby grant disclosure of the information requested below from** \_\_\_\_\_  
Name of Educational Institution

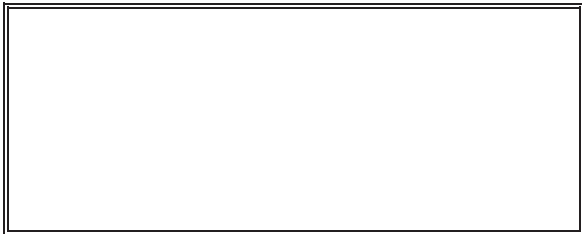
\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Student ID#

**Return Form to:**



**THIS SECTION TO BE COMPLETED BY EDUCATIONAL INSTITUTION**

The above-named individual has applied for residency or is currently residing in housing that requires verification of student status. Please provide the information requested below:

**Is the above-named individual a student at this educational institution?    YES    NO**

**If so, part-time or full-time?    PART-TIME    FULL-TIME**

**If full-time, the date the student enrolled as such:** \_\_\_\_\_

**Expected date of graduation:** \_\_\_\_\_

I hereby certify that the information supplied in this section is true and complete to the best of my knowledge.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Print your name: \_\_\_\_\_

Tel. #: \_\_\_\_\_

Title: \_\_\_\_\_

Educational Institution: \_\_\_\_\_

**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.