For use in verifying Financial Award amounts for LIHTC Properties

To: $\qquad$


Name of Institution Address

## This Section Completed by Management and Executed by Student

$\mathrm{Re}:$ $\qquad$
Applicant/Tenant Name
SSN\#
Unit \#

I hereby authorize the release of my financial aid information:

Signature of Student
Student ID\#
Date
The individual named directly above is an applicant/tenant of a housing program that requires verification of income. The information provided will remain confidential to satisfaction of that stated purpose only. Your prompt response is crucial and greatly appreciated.

Management Company Representative
Return Form To: $\square$

## This Section to be Completed by Financial Aid Provider and/or Educational Institution

## Please provide the information requested:

Student Currrently is Enrolled (please circle one): Full-time Part-time
Total scholarships, grants, etc. (public or private, excluding student loans) received is:
Source Amount Beginning Date Ending Date

Scholarships: $\qquad$
$\qquad$
$\qquad$
$\qquad$
Grants:
Cost of Tuition and Mandatory Fees:
I hereby certify that the information supplied in this section is true and complete to the best of my knowledge.


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.

