

**Instructions:**

The Grand Rapids Housing Commission (GRHC) must verify full-time student status for household members aged 18 or older, as required by federal regulations. If official enrollment documentation from the school is not available, the GRHC will request verification directly from the educational institution.

Please read and sign the authorization allowing the educational institution to release enrollment information to the GRHC. Then, fill out the school's contact information, preferably the registrar's office. Once signed, GRHC will send the form to the institution to complete the remaining sections. *Complete one form for each full-time student reported.*

## Household Member Information

<b>Student Name:</b>				<b>Head of Household:</b> <i>(if different)</i>			
<b>Date of Birth:</b>		<b>SSN #:</b>		<b>Phone Number:</b>			
<b>Address:</b>							
<b>City:</b>				<b>State:</b>		<b>Zip Code:</b>	

## Educational Institution Information

<b>Name:</b>										
<b>Address:</b>				<b>City:</b>			<b>State:</b>		<b>ZIP Code:</b>	
<b>Phone:</b>			<b>Fax:</b>			<b>Email (if available):</b>				

## Household Member Release

I hereby authorize the release of the requested information to the Grand Rapids Housing Commission.

_____ <i>Household Member Signature:</i>	_____ <i>Printed Name:</i>	_____ <i>Date (MM/DD/YYYY)</i>
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**Household Member: Do Not Continue!**

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REASONABLE ACCOMMODATION NOTICE: IF YOU REQUIRE ASSISTANCE OR A REASONABLE ACCOMMODATION TO COMPLETE THIS FORM DUE TO A DISABILITY, PLEASE CONTACT OUR OFFICE AT 616-235-2600. WE ARE COMMITTED TO ENSURING EQUAL ACCESS TO OUR SERVICES AND WILL PROVIDE APPROPRIATE ASSISTANCE TO HELP YOU COMPLETE THIS FORM.

**Educational Institution Instructions:**

The individual above has authorized you to complete this form to help the Grand Rapids Housing Commission verify that they are a full-time student at your institution. This information will be used only for HUD housing program requirements. Please complete each section below, then provide your contact information and sign.

**Educational Institution Authorized Representative Certification**

I hereby certify that the applicant named above is currently enrolled at our institution and is:

1.  **Attending full-time**
2.  **Attending part-time**

<b>Date of Enrollment:</b>		<b>Expected Completion Date:</b>		<b>Enrolled for Summer?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No
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**Notice of Federal Penalties for False Statements (18 U.S.C. § 1001)**

Federal law (18 U.S.C. § 1001) prohibits giving false or misleading information to the U.S. Government, including for housing programs administered by the Grand Rapids Housing Commission (GRHC) and the Department of Housing and Urban Development (HUD). This includes lying, hiding important facts, or submitting documents with false information. Violations may result in fines and up to 5 years in prison (or up to 8 years for certain serious offenses).

<b>Print Name:</b>		<b>Title:</b>		<b>Phone:</b>	
<p>_____</p> <p><i>Authorized Official Signature</i></p>			<p>_____</p> <p><i>Date (MM/DD/YYYY)</i></p>		

**Return Instructions**

**IMPORTANT:** This form must be returned directly by the educational institution's authorized official. For regulatory compliance, GRHC cannot accept forms returned by the applicant/student.

<b>Preferred Method</b>	<b>Email</b>
Please scan and email the completed, signed form to:	<a href="mailto:ic@grhousing.org">ic@grhousing.org</a>
<b>Alternate Method</b>	<b>Fax or Mail</b>
If email is <u>not possible</u> , you may return the form to:	<p><b>Grand Rapids Housing Commission</b>  <b>Attn:</b> _____  <b>1420 Fuller Avenue, S.E.</b>  <b>Grand Rapids, MI 49507</b>            Phone: (616) 235-2600            Fax: (616) 235-2660</p>