

## VERIFICATION OF DOMICILE AND SUPPORT FOR THE PURPOSE OF DOCUMENTING IN COUNTY/IN STATE RESIDENCY

## PLEASE PRINT CLEARLY

Ι	□Tenant □1	Landlord [	Owner (Please check one)
of address:Street Numb			
Street Numb	er and Name		Apartment #
City:	State:	State: Zip Code:	
certify that		has 1	ived at this address
from//	to	/	/
I provide support for this student in the fo	rm of:		
☐ Rent (amount per month) \$			
☐ Room and Board			
☐ All Living Expenses			
☐ Educational Expenses			
☐ Other (please explain):			
☐ I Do Not Provide Financial Sup	pport		
Signature must be verified by a N	otary Public an	d have th	e Notary Seal
Signature:	I	<b>Date:</b>	///
The above signed has duly sworn that the	information provid	led is true a	nd accurate to his/her
knowledge. Signed before me on this	day of		, 20
Notary Seal:	Signature of No	tary:	
	Name (Please p	rint):	
	My commission	n expires on	://