SCHOOL EMPLOYEE AFFIDAVIT

Any adult applying to live in a tax credit unit who is employed by an educational institution should complete this form.

Applicant/Tenant:Unit	#:	
Name of School:		
Position Held (i.e.: teacher, bus driver, assistant)		
Do you work at the school during the summer months?		
[]YES []NO		
If you answered NO, please check the following as applicable to	the summer mor	nths:
 I receive my salary, but will not work during the summer I have/will look for another job I will receive unemployment benefits I will receive gift income from friends/family/etc I will have zero income status Other 	[] YES [] YES [] YES [] YES [] YES [] YES [] YES	[] NO [] NO [] NO [] NO [] NO [] NO [] NO

• If **YES** to 1, 2, 3, or 4 please list the amount of income expected to be received:

(<u>NOTE TO PROPERTY MANAGEMENT</u>: Employment income and gift income earned during summer months must be verified via third party affidavits.)

• If other please explain:

Under penalty of perjury, I certify that the information presented in this certification is true and accurate to the best of my knowledge. The undersigned further understand that providing false representation herein constitutes an act of fraud. False, misleading or incomplete information may result in the termination of a lease agreement.

Signature of Tenant

Date

Signature of Manager

Date