



**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 residence in the following apartment:**

Ashburn Meadows Apartments  
21030 Lowry Park Terrace  
Ashburn, VA 20147

Unit Number (if assigned): \_\_\_\_\_

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

Applicant/Resident 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 your educational institution?      Yes      No

If so, part-time or full-time?      Full-Time      Part-Time

If full-time, please provide 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: \_\_\_\_\_

Printed 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. VHDA - 4/07