



Burlington Lead Program
PO Box 441
Winooski, VT 05404
802-865-5323 (LEAD)

Certification of Full Time Student Status
(To be completed by adult household members only, if appropriate)

Name: _____

Address: _____

I hereby certify that I am a Full Time Student at _____
between the dates of _____ and _____

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(s) that providing false representations herein constitutes an act of fraud. False, misleading, or incomplete information may result in the termination of a lease agreement.

Signature of applicant

Printed name of applicant

Date