

INTERIM RECERTIFICATION REPORTING

Building Name: _____ Unit: _____

Name: _____

I am requesting an interim recertification for the following changes in the household:

___ Increase in income (10% or more of adjusted income)

Date of Change: ___/___/___

Describe: _____

___ Decrease in income, (expected to last more than a month)

Date of Change: ___/___/___

Describe: _____

___ Change in household (additions to/or leaving the household)

Date of Change: ___/___/___

Describe: _____

___ Other significant changes in assets, expenses, since last recertification

Date of Change: ___/___/___

Describe: _____

All must answer the following questions:

___ I have a change in student status in my household. Yes ___ No ___
(Adult member) _____ is a student at an institution of higher learning
as of (date): _____

___ A member of my household has a change in citizenship. Yes ___ No ___
If yes, explain: _____

Please provide any additional information regarding the above changes you are reporting. You may need to sign forms to verify this information.

Signature: _____ Date: _____