



Verified Proof of Residency

Records & Enrollment Services
Main Building, Room M2480
5900 S. Santa Fe Drive
Littleton, CO 80160
records@arapahoe.edu
Fax: 303.797.5970

Student Information:

Student Name:

Student ID:

Student Email:

Proof of Residency Information:

The following information is provided as proof of residency of a student as required under C.R.S 22-1-102
I verify that I am the owner/lessor of the following property:

Home Owner Name:

Home Owner Address:

Dates Student Resided/Will be Residing at Above Address:

Proof of Residency Documentation

Check the proof of ownership or occupancy documentation provide. Student must attached copy of documentation.

- Warranty Deed
- County Tax or Assessment Notice
- Lease Agreement
- Purchase Agreement

Home Owner Certification:

I hereby certify that to the best of my knowledge the information furnished in this form is true and complete without the intent of evasion or misrepresentation. I understand that if the above information submitted is found to be false or misrepresented, the above student could be subject to penalty of perjury and is sufficient cause for dismissal.

****Home owner must sign this form in the presence of a Notary.**

Home Owner Signature**: _____ Date: _____

Notary Certification:

County & State of _____

Sworn and subscribed to me this ____ day of _____

My Commission expires _____

Notary Signature _____



Signature of ACC Staff: _____ Extension: _____ Date: _____