AFFIDAVIT FOR CERTIFICATE OF RESIDENCE
LIVINGSTON COUNTY

Affidavit (or Affirmation) for Certification of Residence pursuant to Section 6305 of Education Law in connection with the attendance at a community college.

Please print in ink

Academic Year

Social Security No:_____   _____-_____

Telephone No:_____

☐ Fall   ☐ Spring
☐ Winter   ☐ Summer

Student Name: I _____ , hereby affirm that I am now, and have been for a period of at least one year immediately prior to the date of this affidavit, a resident of the State of New York and that I have resided at the following address for _____ year(s), _____ month(s):

_____ _____ _____ _____

     Street or Road   Town or City   Zip   County

_____

     Property Owner

***Previous addresses**: (if you have not lived at the above address for at least one year)

Street or Road	Town or City	Zip	County	Years	Months

I further affirm that I plan to enroll at _____ and that this affidavit is made for the purposes of securing a certificate that I have met the residence requirements of Article 126 of Education Law.

Student Signature:_____ **Date:**_____

Sworn to (or affirmed) before me this _____ day of _____, _____

Notary Public:_____

Chief Fiscal Officer of County: ☐ Certificate issued   ☐ Certificate not issued

   Dated_____   By_____