



# MEDGAR EVERS COLLEGE

OF THE CITY UNIVERSITY OF NEW YORK

1665 Bedford Avenue  
Brooklyn, New York 11225  
(718) 270-6024  
Fax (718) 270-6411

Office of Admissions

## Alternate Lease Statement

\_\_\_\_\_  
Student's First & Last Name

\_\_\_\_\_  
Social Security Number

Fall \_\_\_\_, or  Spring \_\_\_\_  
Semester of Entry

(\_\_\_\_\_)\_\_\_\_\_  
Daytime Telephone Number

\_\_\_\_\_  
Address City State Zip code

I have lived at the above address from     /    /     to     /    /     /, but I don't have an apartment lease in my name.  
*MM DD YY MM DD YY*

***Please have the person who lives in the apartment/house and whose name appears as the owner or on the lease fill out the following statement and have it notarized.***

I \_\_\_\_\_ certify that I reside at the address indicated above and that \_\_\_\_\_  
*Renter or Owner Student's Name*  
has resided with me from     /    /     to     /    /     /  
*MM DD YY MM DD YY*

Proof that I have resided at the above address for one year is attached. (i.e., Lease signed by landlord and/or Deed)

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Date*

(Notary Stamp)

I certify that the above information is accurate and complete. I understand that this information may affect my residency status at the College.

I understand that if I provide false information or withhold relevant information in order to obtain resident status, The Medgar Evers College may revoke its determination of in-state residency, and that I will owe non-resident tuition to the College for each semester or session that I have attended under these circumstances. I also understand that I may be subject to disciplinary action.

\_\_\_\_\_  
*Student's Signature*

\_\_\_\_\_  
*Date*

(Notary Stamp)