



**Verification of Household Good-Standing  
for EAH Scholarship**

Date: \_\_\_\_\_

Scholarship Applicant Name: \_\_\_\_\_

Head of Household: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Parents or guardians of the applicant must be in good standing with the lease and rent for the student to be eligible for a scholarship. This form verifies that the above household is in good standing at \_\_\_\_\_ **(Property Name)**.

**Property Manager Name:** \_\_\_\_\_

**Property Manager Signature:** \_\_\_\_\_