

## ALTERNATE RESIDENCY CERTIFICATION CITY COLLEGES OF CHICAGO

	Last Name	Student ID:	College	Date:
tructions for completing	this form:	•	•	•
attached.		th parties, notarized by certificent lease, or home utility bill w		
•	IPLETED BY THE STUD	DENT		
My Current residence is	s:			
Street Address 1				
Street Address 2				
City State, Zip				
County				
I have lived at this addr	ess from:			
Month/Day/Year				
Until:				
Month/Day/Year				
Owner/leasee's no		ed with me from	to	
Student's Name		Mo	onth/Day/Year	Month/Day/Yea
A copy of	my mortgage, lease, o	r home utility bill with thi	is residence is attached	I to this document
., ,				
Signed			Date	)
Signed	IPLETED BY THE STUD	)ENT	Date	

Date

Section D: TO BE COMPLETED BY REGISTRED NOTARY

NOTARIZED STAMP/DATE/SIGNATURE

Last updated: 11/04/2020

Signed