



CITY OF GARDEN GROVE

HOUSING AUTHORITY

VERIFICATION OF SCHOOL ATTENDANCE HIGH SCHOOL/CONTINUATION EDUCATION

RE: _____
Student Name Student ID No./Social Security No.

I hereby authorize that the requested information below be provided to the Garden Grove Housing Authority.

Signature of Parent/Guardian/Student Date

***** TO BE COMPLETED BY SCHOOL ONLY *****

This is to certify that the above named student is enrolled as:

Full-time Part time Not enrolled

Anticipated graduation date: _____

Name of Authorized Representative / Title Telephone Number

Signature of Authorized Representative Date

Name of Educational Institution ***** OFFICIAL STAMP *****

Please mail this form directly to:

**ATTN: _____, Housing Specialist
Garden Grove Housing Authority
P.O. Box 3070
Garden Grove, CA 92842**