**Residency Affidavit**

The purpose of this document is to confirm that the below-named scholar meets the Denver residency requirement for their scholarship organization to receive reimbursement funding from Prosperity Denver Fund.

Scholar First and Last Name:

Date of Birth:

If under the age of 26, a student ***must*** have 1) graduated from a high school in Denver or 2) lived in Denver for six months prior to their first scheduled postsecondary class day. If between 26 and 30 years of age, a student must have lived in Denver for six months prior to their first scheduled postsecondary class day.

1. ***For scholars under 26 years of age only:***I confirm that I graduated from the following high school in Denver.

**High School Name:**

**High School Address**:

**Graduation Date:**

*If not applicable, please complete section 2 on the next page.*

1. **For all eligible ages:** I confirm that I resided in the City and County of Denver for at least six (6) months prior to beginning postsecondary education. I lived at the following address(es) during the specified period(s):

***Address 1***

From Date (MM/YYYY):       To Date (MM/YYYY):

Street Address 1:

City:       State:       Zip Code:

***Address 2***

From Date (MM/YYYY):       To Date (MM/YYYY):

Street Address 2:

City:       State:       Zip Code:

By signing below, I authorize my scholarship organization to release the information specified in this document to Prosperity Denver Fund. I confirm that information provided above is accurate to the best of my knowledge.

 Signature of Scholar:

Signature Date: