Official Documentation needed for New Applicants

Applicant Name		School			
Street Address_					
Cell Number		_2 nd Number		3 rd Number_	
RESIDENT TO PI	ROVIDE:				
Character Lette	rs of Recommendation	ons	(1)	(2)	(3)
			Submitted or	n Business Letterhead	d or with a business card
	Acceptance Letter to	College			
	Official Transcript/G	rades/GED Scores			
	Current Schedule				
	Verification of Financial Assistance (Provided by OPSH)				
	Original Divorce Decree				
I	Drivers License/Picture ID				
	Background from Frankfort or <u>Courts.KY.gov</u> on line \$22.00				
]					
	_ Immunization Certificate for Child/ren				
I	Physical Record for Child/ren (well child check-up form)				
I	Dental Exam				
	Vision Exam				
	Able to obtain utilities from KU in own name				
I	Full/Shared custody of Child/ren				
I	Eighteen (18) years of age				
I	Eligible for Section 8	Housing			
Staff to verify:					
Interview comp	leted			Da	nte
Orientation completed			_	Da	nte

Revised 1/15/2019

