

SELF-DECLARATION OF HOUSING STATUS

Applicant Name: _____

- Household without dependent children (complete one form for each adult in the household)
- Household with dependent children (complete one form for household)
- Number of persons in the household: _____

This is to certify that the above named individual or household is currently homeless or at-risk of homelessness, based on the following and other indicated information and the signed declaration by the applicant.

Check only one:

- I [and my children] am/are currently homeless and living on the street (i.e., a car, park, abandoned building, bus station, airport, or camp ground).
- I [and my children] am/are the victim(s) of domestic violence and am/are fleeing from abuse, have not identified a subsequent residence, and lack the resources or support networks, e.g., family, friends, faith-based, other social networks, needed to obtain housing where my/our safety would not be jeopardized.
- I [and my children] am/are being evicted from the housing we are presently staying in and must leave this housing within the next 14 days.
- I [and my children] have been displaced or am/are afraid to return to the home because a disaster or violent storm has rendered it dangerous or life-threatening.

I certify that I have insufficient financial resources and support networks, e.g., family, friends, faith-based, other social networks, immediately available to obtain housing or to attain housing stability without assistance. I certify that the information above and any other information I have provided in applying for assistance is true, accurate and complete.

Applicant Signature: _____ Date: _____

Staff Certification

I understand that third-party verification is the preferred method of certifying homelessness or risk for homelessness for an individual who is applying for assistance. I understand self declaration is only permitted when I have attempted to but cannot obtain third party verification.

Documentation of attempt made for third-party verification:

Staff Signature: _____ Date: _____