

FAMILY SELF CERTIFICATION OF HOMELESSNESS

Parent #1 _____ certify that as of today's date _____ I and my listed child /children are homeless, living as described in my written statement below, before receiving services.

Parent #2 _____ certify that as of today's date _____ I and my listed child/children are homeless, living as described in my written statement below, before receiving services.

Child's Name _____ Age _____ SS# _____ Gender ____ DOB _____

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MANDATORY written statement regarding me and my family's homelessness:

Parent #1 _____

_____ In places not meant for human habitation, such as cars, parks, sidewalks, abandoned buildings (on the street).

_____ In an emergency shelter.

_____ In transitional or supportive housing for homeless persons who originally came from the streets or emergency shelter.

_____ In any of the above places but I am spending a short time (up to 30 consecutive days) in a hospital or other institution.

_____ I am being evicted within a week from a private dwelling unit and no subsequent residence has been identified, and I lack the resources and support networks needed to obtain housing.

_____ I am being discharged within a week from an institution, such as a mental health or substance abuse treatment facility or a jail/prison, in which I have been a resident for more than 30 consecutive days and no subsequent residence has been identified, and I lack the resources and support networks needed to obtain housing.

_____ I am fleeing a domestic violence-housing situation and no subsequent residence has been identified, and I lack the resources and support networks needed to obtain housing.

First Parent's Signature

DOB & SS#

Date

Second Parent's Signature

DOB & SS#

Date

First Parent's Contact Number

Second Parent's Contact Number