

HOUSING FIRST PROGRAM SELF-DECLARATION OF HOUSING STATUS

HFP 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, 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 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 HFP assistance. I certify that the information above and any other information I have provided in applying for HFP assistance is true, accurate and complete.

HFP Applicant Signature: _____ Date: _____

HFP 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 HFP 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:

HFP Staff Signature: _____ Date: _____