



homeforward

hope. access. potential.

**Certification of Homeless Status – Moderate Rehabilitation SRO Program  
Required for Rosewood, Barbara Maher, Sally McCracken, Hatfield, and The Rose**

Last Name:		First Name:		Middle Initial:
Date of Birth:	SSN:	Sex:	Referring Agency:	

Complete the relevant section of this form  
**See back of this form for more instructions on verifying homelessness**

**Living in place not designed for regular sleeping accommodations (street, car, park, etc.)**  
Provide information about where the applicant has been sleeping while experiencing homelessness:

**Living in an emergency shelter/mission.**  
Provide information about where the applicant has been sleeping while experiencing homelessness:

**Living in transitional housing for the homeless (must have entered from street or shelter)**  
Home Forward **MUST** collect verification that the applicant was sleeping in street/shelter before entering transitional housing. One of these items must be attached:

- Verification from the transitional provider is attached.** It must be on agency letterhead and specify that the applicant was homeless before moving in to transitional housing.
- Written verification is not possible.** I have documented oral certification from staff at the transitional housing stating that the applicant was homeless prior to moving into transitional housing. This documentation also contains information about my attempts to receive written verification.
- Written and oral verification are both not possible.** I have attached documentation of my attempts to collect written and oral certification and I have attached a self-certification from the applicant that includes the approximate dates they resided in transitional housing and that states that they were sleeping in street/shelter prior to entering transitional housing.

**Exiting an institution after stay of 90 days or less (must have entered from street or shelter)**  
Home Forward **MUST** collect verification that the applicant resided in the institution for 90 days or less. One of these items must be attached:

- Discharge paperwork from the institution is attached.** It must include the beginning and end dates
- It is not possible to provide discharge paperwork.** I have documented oral certification from staff at the institution stating the beginning and end dates of time spent in the institution.
- Written and oral verification are both not possible.** I have attached documentation of my attempts to collect written and oral certification and I have attached a self-certification from the applicant that includes the approximate dates they entered and exited the institution.

**I certify that the above information is correct and complete to the best of my knowledge:**

Authorized signature from referring agency:	Date:
Printed Name:	Professional Title:
Agency:	Phone #:

## How to Verify Homelessness

*Please note that couch surfing and staying with friends or family do not meet HUD's definition of homeless for the SRO-MOD 8 program.*

If living on the street or living in a shelter/mission:

1. This form should be completed by an outreach worker, case manager, or other knowledgeable staff of an outreach agency other than the referring building staff. This may include being completed by shelter staff, even if the shelter is owned and/or managed by the same organization as the building. Oral certification may be accepted from a third-party if it is recorded on this form and signed by the worker who accepts the oral verification.
2. The building staff may record their observations of the applicant's homelessness if they are unable to get third-party verification. Documentation of attempts to get third-party certification must be included.
3. If third party verification is not available and if the building staff does not have enough knowledge to record their own observations of homelessness, then the applicant can self-certify. The self-certification must be accompanied by documentation of the efforts staff members have taken to attempt to verify homelessness through third parties.

If exiting transitional housing for the homeless and lived on the street or in a shelter immediately before entering transitional housing:

1. This form should be completed by a staff member of the transitional housing and accompanied by a letter on agency letterhead, signed and dated, that verifies that the applicant was living on the street or in a shelter prior to entering transitional housing.
2. If unable to collect documentation on agency letterhead, oral certification may be accepted from staff of the transitional housing if it is recorded on this form and signed by the worker who accepts the oral certification. Documentation of attempts to get verification on letterhead must be included.
3. If it is not possible to provide certification on agency letterhead or third-party oral certification of the time spent in transitional housing then document attempts to collect this information AND have the applicant self-certify that they have been living in transitional housing and prior to that were living on the street or in a shelter, including dates spent in transitional housing to the best of their memory.

If exiting an institution (inpatient treatment, hospital, jail,) where he or she resided for 90 days or less and resided in an emergency shelter or place not meant for human habitation immediately before entering the transitional housing or institution:

1. This form should be completed by a social worker, case manager, or other appropriate official of the institution. Discharge paperwork including the beginning and end dates of the time spent in the institution should also be included. Written or Oral certification from a qualified third-party may be accepted instead of discharge paperwork if it contains the beginning and end dates of the time spent in the institution. Oral certification must be recorded and signed by the worker who accepts the oral verification.
2. If it is not possible to include discharge paperwork or third-party verification of the dates spent in the institution then document attempts to provide it AND have the applicant self-certify in writing that they were living in the institution for 90 days or less.