

CERTIFICATION OF HOMELESSNESS AND INCOME

Please check any of the following that apply to you and your family.

Do you have any of the following?

- ☐ A family member that you can stay with?
- ☐ A friend that you can stay with?
- ☐ Any means of having a permanent residence.
- ☐ Are you employed? \$_____ monthly
- ☐ Do you have any stocks or Bonds?
- ☐ Do you have a 401K or an IRA account?
- ☐ Do you receive any Social Security Benefits of any type? \$_____
- ☐ Do you receive any type of pension income? \$_____
- ☐ Any other source of income? \$_____

I certify that the above information is true and correct to the best of my knowledge. I certify that no subsequent residence has been identified and that I lack the resources or support networks to obtain other permanent housing.

Signature

Date



Updated: March 2017