



Self-Certification of Homelessness

Permanent Supportive Housing

Instructions: This self-statement certification may be used when a homeless person applying to a program serving chronically homeless persons lacks connections with service providers to complete a third party verification of a history of chronic homelessness. This self-statement should be maintained in the client's file. ***Navigators must document in HMIS all attempts to gain 3rd Party verification when using Self-Certification.***

Client Name: _____

HMIS Number: _____

I certify that I was homeless (that is, sleeping on the streets or in a place not meant for human habitation) OR staying in a homeless emergency shelter during the following time period:

Between _____ (month/year) and _____ (month/year) I lived at _____ (place)
Between _____ (month/year) and _____ (month/year) I lived at _____ (place)
Between _____ (month/year) and _____ (month/year) I lived at _____ (place)
Between _____ (month/year) and _____ (month/year) I lived at _____ (place)
Between _____ (month/year) and _____ (month/year) I lived at _____ (place)
Between _____ (month/year) and _____ (month/year) I lived at _____ (place)
Between _____ (month/year) and _____ (month/year) I lived at _____ (place)
Between _____ (month/year) and _____ (month/year) I lived at _____ (place)

Please provide additional information describing your location during this time period:

I certify that the above information is correct.

Client Signature: _____

Date: _____

I reviewed the above statement with the client.

Staff Signature: _____

Date: _____

Agency: _____

Attempts at obtaining 3rd party verification are documented in HMIS