

(325) 481-2500 Fax (325) 481-2506

Homelessness Status

The purpose of this form is to assist in accurately reporting the homeless status of new admissions to HUD. Please complete the form in its entirety. For the purposes of this form, HUD does **not** require PHAs to collect documentation or third-party verification of any kind in order to verify homeless status.

- 1. Are you currently living in a car, on the street, or another place not meant for human habitation? □ YES or □ NO
- 2. Are you currently living in an emergency shelter, transitional housing, Safe Haven, or a hotel/motel paid for by a charitable organization or by federal, state or local government programs for low-income individuals? □ YES or □ NO
- **3.** Are you exiting an institution, including a hospital, substance abuse or mental health treatment facility, or jail/prison, where you stayed for 90 days or less? \Box YES or \Box NO
 - **a.** If so, were you living in an emergency shelter or place not meant for human habitation immediately before entering that institution? \Box YES or \Box NO
- **4.** Are you fleeing or attempting to flee domestic violence, dating violence, sexual assault, stalking, or other dangerous or life threatening conditions for you or a family member, including a child, that has either taken place within your family's primary nighttime residence or has made you afraid to return to your primary nighttime residence? □ YES or □ NO
 - **a.** If yes, do you currently have nowhere else to live and also lack resources or support networks? □ YES or □ NO

Head of Household Signature

Date

<u>PHA USE ONLY</u> HOMELESS AT ADMISSION:

 \Box YES or \Box NO