**Supportive Services for Veteran Families (SSVF) Program**

**SELF-DECLARATION OF HOUSING STATUS**

SSVF Participant 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 the housing status of the above named individual or household, 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 residing in permanent housing.

I [and my children] am/are homeless and scheduled to become a resident of permanent housing within 90 days pending the location or development of housing suitable for permanent housing.

I [and my children] have exited permanent housing within the previous 90 days to seek other housing that is responsive to the my/our needs and preferences.

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

SSVF Participant Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**SSVF Staff Certification**

I understand that third-party verification is the preferred method of certifying housing status for an individual who is applying for SSVF 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:*

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SSVF Staff Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_