

CoC Program Participant Homelessness Verification Form

PART 1: GENERAL INSTRUCTIONS							
Instructions:	<ul style="list-style-type: none"> • Complete all fields in Part 2. • Complete all relevant fields in Part 3. • Attach all supporting documents to this form. • Maintain this form and all supporting documents in the participant's file. • See Part 4 for <i>Detailed Requirements</i> and Part 5 for a <i>Quick Guide to Eligibility</i> 						
PART 2: GENERAL INFORMATION							
Admitting Agency Name:							
CoC Program for which Homelessness is Being Certified:	Program Name					Date of Entry into CoC Program	
Participant Information:	Participant Name			HMIS #		Date of Birth	
PART 3: CURRENT HOMELESS STATUS & HISTORY							
Current Homeless Status – Indicate place where client was staying immediately prior to program entry (Check One): <i>Required Documentation Must Be Attached (See Part 4).</i>							
<input type="checkbox"/> Unsheltered (U) <input type="checkbox"/> Emergency Shelter (ES) <input type="checkbox"/> Trans Housing -must be homeless prior to entry (TH) <input type="checkbox"/> Rapid Re-Housing <input type="checkbox"/> Permanent Supportive Housing <input type="checkbox"/> Institution for < 90 days (see definition in Part 4) <input type="checkbox"/> Imminent Risk of Homelessness (see definition in Part 4)							
Is client fleeing or attempting to flee domestic violence (Check One)? <input type="checkbox"/> YES <input type="checkbox"/> NO <i>Required Documentation Must Be Attached (See requirements in Part 4).</i>							
Homeless History <i>Starting with the most recent episode of homelessness, provide the names, dates and types of locations where the participant stayed when they were homeless during the past three years.</i> <i>Required Documentation Must Be Attached - See requirements in Part 4.</i>							
Program Name or Location	Type: U, ES, or TH*	Start Date	End Date	Program Name or Location	Type: U, ES, or TH*	Start Date	End Date
*U = Unsheltered ES = Emergency Shelter TH = Transitional Housing							
Homeless Status: <input type="checkbox"/> Literally homeless <input type="checkbox"/> Chronically Homeless <input type="checkbox"/> At Imminent risk of homelessness							
Name of Staff Person Completing Form:				Staff Title:		Date Completed:	
Signature:						<input type="checkbox"/> Check to certify that all required documents are attached.	

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PART 4: DETAILED REQUIREMENTS AND DEFINITIONS

Permanent Supportive Housing – Not for Chronically Homeless

EVIDENCE OF HOMELESS STATUS:

Attach to this form, a signed and dated certification from an outreach worker or other housing/service provider demonstrating that the individual or head of household is **currently** homeless and living in a place not meant for human habitation, in an emergency shelter, transitional housing, or a safe haven.

OR

Is fleeing or attempting to flee domestic violence, dating violence, sexual assault or stalking; and has no other residence; and lacks the resources or support networks to obtain other permanent housing. HUD stresses that where the safety of the individual or family would be jeopardized by an intake worker's attempt to obtain third party verification, that the intake worker must not attempt to obtain, under any circumstances, third-party verification and may accept written certification by the individual or head of household.

Evidence must demonstrate that the participant was currently homeless at the time of entry into the CoC program.

For participants **currently in RRH** seeking admission to PSH you **must attach evidence** that they met this criteria prior to entry into RRH. RRH participants retain their homeless status during the time period that they are receiving the RRH assistance.

For participants **currently in TH** you **must attach evidence** that they originally came from the streets or an emergency shelter.

EVIDENCE OF HOMELESS STATUS: Applies only to institutional discharges:

Attach to this form: discharge paperwork or a written or oral referral from an appropriate official of the institution, stating the beginning and end dates of the time residing in the institution demonstrating the person resided there for less than 90 days. All oral statements must be recorded; OR Where the evidence above is not obtainable, a written record of the intake worker's due diligence in attempting to obtain the evidence described in the paragraph above and a certification by the individual seeking assistance that states that they are exiting or have just exited an institution where they resided for less than 90 days; AND Evidence that the individual was homeless and living in a place not meant for human habitation, a safe haven, or in an emergency shelter, and met the criteria for chronically homeless immediately prior to entry into the institutional care facility. **Note: People who lived in Transitional Housing prior to entering an institution are not eligible.**

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Permanent Supportive Housing –Chronically Homeless

DEFINITION

To be chronically homeless an **individual** must:

- 1) Live in a place not meant for human habitation, a safe haven, or in an emergency shelter (**Note: People living in Transitional Housing are not defined as chronically homeless by HUD.**); AND
- 2) Have been homeless and residing in a place not meant for human habitation, a safe haven, or in an emergency shelter continuously for at least one year or on at least 4 separate occasions in the last 3 years; AND
- 3) Be diagnosed (or able to be diagnosed) with one or more of the following conditions: substance use disorder, serious mental illness, developmental disability (as defined in section 102 of the Developmental Disabilities Assistance Bill of Rights Act of 2000), post-traumatic stress disorder, cognitive impairments resulting from brain injury, or chronic physical illness or disability;

An individual who has been residing in an institutional care facility, including a jail, substance abuse or mental health treatment facility, hospital, or other similar facility, for **fewer than 90 days** AND who was chronically homeless before entering that facility also qualifies. You **must attach evidence** as described under PSH above.

A **family** with an adult head of household (or if there is no adult in the family, a minor head of household) who meets all of the criteria defined above, including a family whose composition has fluctuated while the head of household has been homeless, also qualifies.

For participants **currently in RRH** you **must attach evidence** that they met this criteria prior to entry into RRH. RRH participants retain their chronically homeless status during the time period that they are receiving the RRH assistance.

HUD has determined that once a chronically homeless household has been determined eligible and accepted into a CoC Program-funded permanent supportive housing program, that, **under limited circumstances**, household may stay with a friend or family, in a hotel/motel, or in a transitional housing bed, while a PSH bed is identified (see [FAQ Q#23](#) for details).

EVIDENCE OF CHRONICALLY HOMELESS STATUS:

Chronically Homeless participant files must include evidence of:

- Homeless Status (See Above);AND
- Duration (See Below); AND
- Disability (See Disability Form)

Evidence must demonstrate that the participant was **currently chronically homeless** at the time of entry into the CoC program. HUD has determined that after an individual or family has been accepted into a program but before an appropriate unit has been identified, a household may stay with a friend or family or in a hotel or motel without losing their eligibility for the PSH program in which they have already been accepted. HUD would also allow a CoC to temporarily house the participant in an available transitional housing bed while a permanent housing unit is identified. This allowance is only permitted in the circumstances described here and does not apply to persons enrolled in transitional housing that were considered chronically homeless prior to entry into the program and the following requirements apply:

(1) Since the program participant has been accepted into a PSH project, the transitional housing provider cannot place any requirements on the program participant, including requiring a program participant to participate in additional services as a condition of occupancy or requiring the program participant to meet sobriety requirements.

(2) The PSH provider must be **actively** assisting the program participant to identify a unit as quickly as possible and must be able to document attempts at locating a unit in the case file. Under no circumstances, should the placement in transitional housing slow down placement into permanent housing. This means that placing a program participant into a permanent housing unit should not take any longer than the time it would normally take to place someone in permanent housing who is residing on the streets or in an emergency shelter.

(3) There cannot be duplication in billing for the program participant. For example, both programs cannot provide and then

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seek reimbursement from HUD for housing search or other services. The PSH provider and the TH provider must coordinate to ensure that appropriate services are provided and the same services are not being paid for out of both grants.

You must attach evidence of either one year continuous homelessness OR 4 episodes in 3 years.

Option 1: Evidence of duration of homelessness – At Least One Year Continuous

Provide evidence that the homeless occasion was continuous, for a year period, without a break in living or residing in a place not meant for human habitation, a safe haven, or in an emergency shelter. A break is considered at least seven or more consecutive nights not residing in a place not meant for human habitation, in shelter, or in a safe haven.

At least 9 months of the 1-year period must be documented by one of the following: (1) HMIS data, (2), a written referral, or (3) a written observation by an outreach worker.

In only rare and the most extreme cases, HUD would allow a certification from the individual or head of household seeking assistance in place of third-party documentation for up to the entire period of homelessness.

Where third-party evidence could not be obtained, the intake worker must obtain a certification from the individual or head of household seeking assistance, and evidence of the efforts made to obtain third-party evidence as well as documentation of the severity of the situation in which the individual or head of household has been living. An example of where this might occur is where an individual has been homeless and living in a place not meant for human habitation in a secluded area for more than 1 year and has not had any contact with anyone during that entire period.

Note: A single encounter with a homeless service provider on a single day within 1 month that is documented through third-party documentation is sufficient to consider an individual or family as homeless for the entire month unless there is any evidence that the household has had a break in homeless status during that month (e.g., evidence in HMIS of a stay in transitional housing).

Option 2: Evidence of duration of homelessness – At least four separate homeless occasions over 3 years.

Provide evidence that the head of household experienced at least four, separate, occasions of homelessness in the past 3 years. HUD has not required that a single occasion of homelessness must total a certain number of days. Instead, HUD would consider an occasion to be any period of homelessness where the household resided in a place not meant for human habitation, an emergency shelter, or a safe haven where that period was demarcated by a break, defined as at least 7 or more consecutive nights not residing in a place not meant for human habitation, in shelter, or in a safe haven.

Generally, at least three occasions must be documented by either: (1) HMIS data, (2) a written referral, or (3) a written observation. Any other occasion may be documented by a self-certification with no other supporting documentation.

In only rare and the most extreme cases, HUD will permit a certification from the individual or head of household seeking assistance in place of third-party documentation for the three occasions that must be documented by either: (1) HMIS data, (2) a written referral, or (3) a written observation.

Where third-party evidence could not be obtained, the intake worker must obtain a certification from the individual or head of household seeking assistance, and must document efforts made to obtain third-party evidence, and document of the severity of the situation in which the individual has been living. An example of where this might occur is where an individual has been homeless and living in a place not meant for human habitation in a secluded area for more than one occasion of homelessness and has not had any contact with anyone during that period.

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Rapid Re-Housing

Must serve only families coming from emergency shelters or the streets. **Attach to this form**, a signed and dated certification from an outreach worker or other housing/service provider demonstrating that the individual or head of household is **currently** homeless and living in a place not meant for human habitation or in an emergency shelter.

Transitional Housing

Attach to this form, a signed and dated certification from an outreach worker or other housing/service provider demonstrating that the individual or head of household is **currently** homeless and living in a place not meant for human habitation, in an emergency shelter, transitional housing, or a safe haven (*see note below re special requirements for CT BOS CoC*).

OR

Is fleeing or attempting to flee domestic violence, dating violence, sexual assault or stalking has no other residence; and lacks the resources or support networks to obtain other permanent housing. HUD stresses that where the safety of the individual or family would be jeopardized by an intake worker's attempt to obtain third party verification, that the intake worker must not attempt to obtain, under any circumstances, third-party verification and may accept written certification by the individual or head of household.

OR

Individual or family will imminently lose their primary nighttime residence, provided that: (i) Residence will be lost within 14 days of the date of application for homeless assistance; (ii) No subsequent residence has been identified; and (iii) The individual or family lacks the resources or support networks needed to obtain other permanent housing.

To document imminent loss of housing you must **attach to this form**: A court order resulting from an eviction action notifying the individual or family that they must leave; OR For Individuals and families leaving a hotel or motel, evidence that they lack the financial resources to stay; OR a documented and verified oral statement; AND Certification that no subsequent residence has been identified; AND self-certification or other written documentation that the individual or family lacks the financial resources and support necessary to obtain permanent housing.

For participants **currently in another TH program** you **must attach evidence** that they originally came from the streets or an emergency shelter.

Special TH Eligibility Requirements for CT BOS CoC

Applicants must be screened for diversion and admitted only if no other options are available. Projects may serve only participants coming from emergency shelter and unsheltered locations with income below 30% of AMI.

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PART 5: QUICK REFERENCE GUIDE - ELIGIBILITY FOR COC PROGRAMS

Important Note: This guide is intended for quick reference only. CoC Programs should carefully review all details regarding homelessness and disability requirements and ensure adequate documentation is in each participant chart to avoid recapture of program funds by HUD.

Component Type	Eligible Participants
Permanent Supportive Housing – <u>Not</u> for Chronically Homeless People	<p>Currently homeless and living in a place not meant for human habitation, in an emergency shelter, transitional housing (originally from the streets or an emergency shelter), or a safe haven;</p> <p>OR</p> <p>Is fleeing or attempting to flee domestic violence, dating violence, sexual assault or stalking;</p> <p>AND</p> <p>One or more members of the household is diagnosed with a disability.</p>
Permanent Supportive Housing – For <u>Chronically Homeless</u> People	<p>Live in a place not meant for human habitation, a safe haven, or in an emergency shelter (<i>Note: People living in Transitional Housing are not defined as chronically homeless by HUD.</i>);</p> <p>AND</p> <p>Have been homeless and residing in a place not meant for human habitation, a safe haven, or in an emergency shelter continuously for at least one year or on at least 4 separate occasions in the last 3 years; AND</p> <p>AND</p> <p>An adult head of household, or, if there is no adult in the family, a minor head of household, is diagnosed with a disability</p>
Rapid Re-housing	Families coming from emergency shelters or the streets.
Transitional Housing	<p>Currently homeless and living in a place not meant for human habitation, in an emergency shelter, transitional housing, or a safe haven (<i>see note below re special requirements for CT BOS CoC</i>).</p> <p>OR</p> <p>Is fleeing or attempting to flee domestic violence, dating violence, sexual assault or stalking has no other residence; and lacks the resources or support networks to obtain other permanent housing.</p> <p>OR</p> <p>Will imminently lose their primary nighttime residence, provided that: (i) Residence will be lost within 14 days of the date of application for homeless assistance; (ii) No subsequent residence has been identified; and (iii) The individual or family lacks the resources or support networks needed to obtain other permanent housing.</p> <p>Special TH Eligibility Requirements for CT BOS CoC</p> <p>Applicants must be screened for diversion and admitted only if no other options are available. Projects may serve only participants coming from emergency shelter and unsheltered locations with incomes below 30% of AMI.</p>