

# SELF-DECLARATION OF HOUSING STATUS

HPRP Applicant 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 that the above named individual or household is currently homeless or at-risk of homelessness, based on the following and other indicated information and the signed declaration by the applicant.**

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**Check only one:**

I [and my children] am/are currently homeless and living on the street (i.e. a car, park, abandoned building, bus station, airport, or camp ground).

I [and my children] am/are the victim(s) of domestic violence and am/are fleeing from abuse.

I [and my children] am/are being evicted from the housing we are presently staying in and must leave this housing within the next \_\_\_\_ days.

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

HPRP Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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**HPRP Staff Certification**

I understand that third-party verification is the preferred method of certifying homelessness or risk for homelessness for an individual who is applying for HPRP 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:*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

HPRP Staff Signature: \_\_\_\_\_ Date: \_\_\_\_\_