



Homelessness Documentation

Client Name: _____

I. Type of documentation obtained:

___ Third Party Documentation

___ Staff Observation

___ **Client Self Certification (with certification form)

II. Description of the documentation Obtained:

III. **If Self Certification is being used, explain the process or attempts made to get third party verification first:

Check here if all documentation is in case file

Agency Staff Signature _____ Date _____