



# HOMELESS VERIFICATION FORMS

## GRANTEE WORKSHOP

Anna Jacobsen  
City of Pasadena

# OBJECTIVES

UNDERSTAND

Understand HUD definitions & recordkeeping requirements

IDENTIFY

Identify acceptable documentation for homeless status

ADOPT

Adopt & use homeless verification forms



# DEFINITIONS

# LITERALLY HOMELESS

## DEFINED

Individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning they are either:

### **Unsheltered**

Has a primary nighttime residence that is a public or private place not meant for human habitation (including a car, park, abandoned building, streets/sidewalks, or bus station).\*

### **Temporarily Sheltered**

Living in a publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, state and local government programs)

### **Institution <90 days & unsheltered or emergency shelter prior to stay**

Exiting an institution where (s)he has resided for 90 days or less and resided in an emergency shelter or place not meant for human habitation immediately before entering that institution

\* This does not include people living in housing that is substandard and in need of repair or housing that is crowded.

# CHRONICALLY HOMELESS DEFINED

An individual or family who:

HOMELESS STATUS\*\*

## **Literally Homeless**

Is homeless and lives in a place not meant for human habitation, a safe haven, or in an emergency shelter; and

## **Duration (12 continuous months or 4 occasions in last 3 years)**

Has been homeless continuously for at least one year\* or on at least four separate occasions in the last 3 years; and

## **Disability or Illness**

Can be diagnosed with one or more of the following conditions: substance use disorder, serious mental illness, developmental disability, post-traumatic stress disorder, cognitive impairments resulting from brain injury, or chronic physical illness or disability

Or an individual or family who has been residing in an institutional care facility for fewer than 90 days and met all of the above criteria before entering that facility

\*A break in continuous homelessness is considered at least seven (7) or more consecutive nights not residing in a place not meant for human habitation, shelter or safe haven.

\*\*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).



HOMELESS STATUS  
RECORDKEEPING  
REQUIREMENTS

# HOMELESS STATUS

## Acceptable Documentation & Order of Priority



**PRIORITY 01\***  
HMIS  
Records



**PRIORITY 02\***  
3<sup>rd</sup> Party  
Written  
Verification



**PRIORITY 03\***  
Outreach /  
Intake Worker  
Observation



**PRIORITY 04**  
3<sup>rd</sup> Party  
Oral  
Verification



**PRIORITY 05**  
Self  
Declaration

\* To document chronic homelessness, 9/12 months or 3/4 occasions must be documented through one of the first three methods. The remaining time period can be documented through the additional methods. See CoC Interim Rule (24 CFR 578.103), ESG Interim Rule (24 CFR 56.500), HUD's Notice on Prioritizing Chronically Homeless (CPD-14-012), and the HEARTH Homeless Definition Final Rule (583.301(b)) for a complete set of recordkeeping requirements.

*Pasadena Partnership*  
HOMELESS STATUS  
VERIFICATION  
FORMS

Easy to understand forms that allow agencies to document homelessness for each of these methods.

Easily identifiable &

HUD compliant



\* These forms do not verify:

Chronic homeless status  
Program eligibility  
Disability status  
Income  
Need



# WHO SHOULD USE THESE FORMS?

CoC Grantees

ESG Grantees\*

Non-funded  
agencies that  
refer to ESG or  
CoC grantees

\*ESG-funded emergency shelters and homeless prevention program have different recordkeeping requirements

01

priority



# HMIS RECORDS

Simplest way to verify  
homelessness

Two steps:

- Participating Organization Agreement
- Interagency Data Sharing Consent Form

For more information

Contact Onik Nazarian  
onazarian  
@cityofpasadena.net

02

priority



# *3<sup>RD</sup> PARTY* WRITTEN VERIFICATION

Applicant  
Information

Name  
Release authorization

Agency  
Information

Contact info  
Facility Type

Dates of  
Stay / Prior  
Residence

Location  
Date(s) of stay  
Total Days  
Prior Residence

Certification

3<sup>rd</sup> party  
certification of  
homeless status

03

priority



# OUTREACH / INTAKE WORKER OBSERVATION

Applicant  
Information

Name  
Family Type

Living  
Situation

Description of the  
living situation

Certification

Outreach worker  
certification of  
homeless status

04

priority



*3<sup>RD</sup> PARTY*

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**ORAL**

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**VERIFICATION**

Applicant  
Information

Name  
Release authorization

Oral  
Verification

Details about the  
conversation and  
third-party  
representative

Staff  
Verification

Any additional  
staff observations

Certification

Certification of  
due diligence in  
attempting to  
secure 3<sup>rd</sup> party  
written verification

05

priority



# SELF DECLARATION

Applicant  
Information

Name  
Family type

Homeless  
Type

Multiple  
categories  
For literally  
homeless, be sure  
to complete  
homeless history

Applicant  
Certification

Certification that  
information is  
correct

Staff  
Certification

Documentation of  
due diligence in  
securing 3<sup>rd</sup> party  
verification

open discussion  
& questions