## Homelessness Prevention Eligibility Evaluation Form (Homeless Status)

This checklist may be used to evaluate ESG Homeless Prevention program eligibility for persons who meet HUD's Category 2, 3, or 4 definition of homelessness at entry and have income at or below 30% AMI. Please complete all three sections and attach the required evidence demonstrating the household is eligible for the program.

## Applicant Name:

SECTION 1: HOMELESS STATUS CERTIFICATION (complete one category)
Category 2: Imminent Risk of Homelessness Individuals or families who fall under the HUD Category 2 definition of homelessness will lose their primary nighttime residence, provided that (must meet all three conditions): Residence will be lost within 14 days of the date of application for homeless prevention assistance; and No subsequent residence has been identified; and The individual or family lacks the resources or support networks needed to obtain other permanent housing
<ul> <li>Evidence</li> <li>One of the following forms of documentation must be used to certify HUD Category 2 homeless status:</li> <li>A court order resulting from an eviction action notifying the individual or family that they must leave; or</li> <li>For individuals and families leaving a hotel or motel – evidence that they lack the financial resources to stay; or</li> <li>A completed Self-Certification of Homeless Status form that verifies no subsequent residence has been identified and that the individual or family lacks the financial resources and support necessary to obtain permanent housing.</li> </ul>
Category 3: Homeless under other Federal Statutes Individuals or families who fall under the HUD Category 3 definition of homelessness are unaccompanied youth under 25 years of age, or families with children and youth, who do not otherwise qualify as homeless under this definition but who (must meet all four conditions): Are defined as homeless under the other listed federal statutes; and Have not had a lease, ownership interest, or occupancy agreement in permanent housing during the 60 days prior to the homeless prevention assistance application; and Have experienced persistent instability as measured by two moves or more during the preceding 60 days; and Can be expected to continue in such status for an extended period of time due to special needs or barriers
<ul> <li>Evidence</li> <li>All of the following forms of documentation must be used to certify HUD Category 3 homeless status:</li> <li>Certification by the nonprofit or state or local government that the individual or head of household seeking assistance met the criteria of homelessness under another federal statute; and</li> <li>A completed Self-Certification of Homeless Status form and any available supporting documentation, that the individual or family has had no PH in the last 60 days and has moved two or more times during that time; and</li> <li>Documentation of special needs or 2 or more barriers</li> </ul>
Category 4: Fleeing / Attempting to Flee DV Individuals or families who fall under the HUD Category 4 definition of homelessness (must meet all three conditions):  Are Fleeing or attempting to flee domestic violence; and Have no other residence; and Lack the resources or support networks to obtain other permanent housing Evidence Evidence of HUD Category 4 homeless status must include all of the following: Oral statement by the individual or head of household seeking assistance that they are fleeing. This statement is documented by a self-certification or by the caseworker. Where the safety of the individual or family is not jeopardized, the oral statement must be verified A completed Self-Certification of Homeless Status form documenting that no subsequent residence has been identified and that the individual or family lacks the financial resources and support networks to obtain other permanent housing
SECTION 2: INCOME CERTIFICATION  The individual or family has an income <u>below</u> 30 percent of the Los Angeles County median family income  Evidence ESG Income Worksheet and relevant documentation forms
SECTION 3: STAFF CERTIFICATION         By signing below, I certify that to the best of my knowledge, the program participant named above:         Meets all of the requirements to receive homelessness prevention assistance (meets HUD Category 2, 3, or 4 definition of Homelessness AND has an income at or below 30% AMI.         DOES NOT meet the requirements to receive homelessness prevention assistance         I further certify all of the following: (1) to the best of my knowledge and ability, all of the information used in making this eligibility determination is true and complete. (2) I am not related to the program participant through family, business or other personal ties. (3) To the best of my knowledge, neither I nor anyone related to me has received or will receive any financial benefit for this eligibility determination. (4) I understand that fraud is investigated by the Department of Housing and Urban Development, Office of Inspector General, and may be punished under Federal laws. (5) I understand that if any of these certifications is found to be false, I will be subject to criminal, civil and administrative penalties and sanctions.
Staff Signature:      Date: