

# Observation of Homeless Status by Outreach Worker or Intake Staff

This document may be used by outreach workers to certify that the below named individual or household is currently homeless based on the check mark, other indicated information, and signature indicating their current living situation.

## Applicant Name

### Family Type

Individual

Family with an adult head of household (or if there is no adult in the family, a minor head of household), including a family whose composition has fluctuated while the head of household has been homeless

Number of persons in the household: \_\_\_\_\_

### Living Situation

The person(s) named above is/are currently living in a public or private place not designed for, or ordinarily used as a regular sleeping accommodation, including a car, park, abandoned building, streets/sidewalks or bus station.

Description of current living situation: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### Duration of Homelessness

The person(s) named has been observed living in the above living situation during the following time period:

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

### Outreach Worker Certification

I certify that the above applicant was observed as homeless and living in a place not designed for, or ordinarily used as a regular sleeping accommodation.

Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Title: \_\_\_\_\_ Date: \_\_\_\_\_

Agency Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_