

Client Statement of Homelessness

I, _____ certify that:

Please initial any applicable items

___ Last night I spent the night in a place not meant for human habitation

___ A park

___ Abandoned Building

___ Car

___ Street /Sidewalk

___ other (Please describe): _____

___ I am being evicted or was evicted from my place of residence.

Address: _____

Landlord _____

___ I lack the resources and support network to secure housing without assistance.

___ I am fleeing a domestic violence situation and lack the resources to secure housing.

Statement:

(Please continue on back if necessary)

Guest Signature: _____ Date: _____

Staff Signature: _____ Date: _____