

Choices for Children



Child Development Incorporated

Self-Declaration of Homeless

Case Name: _____

Counselor Initials: _____

Parent and/or Guardian Requesting to Seek Permanent Housing: _____

“Homelessness” means a person or family that lacks a fixed, regular, and adequate night-time residence, for example: sharing the housing of other persons, living in motels, hotels, shelters, awaiting foster care placement, living in vehicles, parks, public spaces, abandoned buildings, substandard housing, bus or train stations, or similar settings. (*Title 5, §18087(h)*)

This form is to **ONLY** be used when basis of eligibility is homelessness (as described above) **AND** the family is unable to provide (*Title 5, §18090(a)*) “A written referral from an emergency shelter, or other legal, medical or social service agency.

- My seeking time will **begin**: ____/____/____ and **will end**: ____/____/____, unless I voluntarily report a change in status.

- I may receive services **for no less than 24 Months**

- **Schedule:** Days and Hours plan to seek housing: **Set Schedule** or **Variable Schedule**

Day of the Week	MON	TUES	WED	THURS	FRI	SAT	SUN
From							
To							

Documentation of Homelessness shall include a written declaration that the family is Homeless and a statement describing the family’s current living situation. (*Title 5, §18090(b)*)

I attest and declare under penalty of perjury and the laws of California that the above information is true and correct.

Parent Signature: _____

Date: _____

STAFF USE ONLY

If applicable, staff will include a brief statement attesting to the reasonableness of the claims above.

Staff name: _____ Staff Signature: _____ Date: _____