# ESG – Homeless Status – Documenting Rapid ReHousing

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| **Applicable Program** | **Living Situation** | **Homeless per ESG Criteria?** | **Acceptable Types of Documentation (in order of preference)** | **Documentation Requirements and Process** |
| **ESG** | **Sleeping in an Emergency Shelter**  *Note: This only includes Emergency Shelter programs identified in the Continuum of Care’s (CoC) most recent Housing Inventory Chart submitted to HUD or otherwise recognized by the CoC as part of the CoC inventory (e.g. newly established Emergency Shelters)* | Yes | HMIS record of shelter stay | * Obtain HMIS record showing shelter stay concurrent with program entry date * Include HMIS record in participant file |
| **OR**  *(if HMIS record cannot be obtained)* | |
| Written homeless certification | * Obtain signed and dated original Homeless Certification from shelter provider * Include Homeless Certification in participant file |
| **OR**  *(if HMIS record and Homeless Certification cannot be obtained)* | |
| Emergency shelter provider letter | * Obtain letter from emergency shelter provider * Letter: * Is on shelter provider letterhead * Identifies shelter program * Includes statement verifying current shelter occupancy of participant, including most recent entry and exit (if applicable) dates * Is signed and dated by shelter provider * Include emergency shelter provider letter in participant file |
| **Place Not Meant for Human Habitation**  (e.g., cars, parks, abandoned buildings, streets/ sidewalks) | Yes | Written homeless certification | * Obtain signed and dated original Homeless Certification from homeless street outreach provider * Include Homeless Certification in participant file |
| **OR**  *(If Homeless Certification cannot be obtained)* | |
| Homeless street outreach provider letter | * Obtain letter from homeless street outreach provider. The letter may be from the rapid re-housing provider if the provider also provides outreach to persons on the street as part of engagement and admission activities * Letter: * Is on outreach provider letterhead * Identifies outreach program * Includes statement verifying current homeless status of participant * Is signed and dated by outreach provider * Include outreach provider letter in participant file |
| **OR**  *(If Homeless Certification and provider letter cannot be obtained)* | |
| Self-declaration of homelessness | * Obtain signed and dated original self-declaration from applicant * Worker documents attempt to obtain written third party verification and signs self-declaration form * Include self-declaration in participant file |
| **Hospital or Other Institution** | Yes, if also meet the following two conditions:   1. Stay in a hospital or other institution has been for 90 days or less **AND** 2. Was sleeping in an emergency shelter or other place not meant for human habitation prior to entry into the hospital or institution | Letter from hospital or other institution | * Obtain letter from hospital or other institution * Letter: * Is on hospital or other institution letterhead * Includes statement verifying current hospital/institution stay of participant * Includes hospital/institution admission and discharge dates verifying that stay has been for 90 days or less * Is signed and dated by hospital/institution representative * Include hospital/institution letter in participant file |
| **AND**  *(to verify homeless status prior to hospital or other institution admission)* | |
| HMIS record of shelter stay *(if previously sleeping in emergency shelter)* | * Obtain HMIS record showing shelter stay concurrent with program entry date * HMIS record indicates shelter stay immediately prior (i.e. the day before or same day as) hospital/institution admission date * Include HMIS record in participant file |
| **OR**  *(if HMIS record cannot be obtained)* | |
| Written homeless certification *(if previously sleeping in emergency shelter or place not meant for human habitation)* | * Obtain signed and dated original Homeless Certification from shelter provider or homeless street outreach provider * Certification verifies homelessness (residing in shelter or place not meant for human habitation) immediately prior to (i.e.; the day before or same day as) hospital/institution admission date * Include Homeless Certification in participant file |
| **OR**  *(if HMIS record and Homeless Certification cannot be obtained)* | |
| Emergency shelter provider or homeless street outreach provider letter *(if previously sleeping in emergency shelter or place not meant for human habitation)* | * Obtain emergency shelter provider letter * Letter: * Is on shelter provider letterhead * Identifies shelter program * Includes statement verifying current shelter occupancy of participant, including most recent entry and exit (if applicable) dates * Is signed and dated by shelter provider * Include documentation in participant file |
| **OR**  *(if HMIS record, Homeless Certification, or provider letter cannot be obtained)* | |
| Self-declaration of homelessness *(ONLY if previously sleeping in place not meant for human habitation)* | * Obtain signed and dated original self-declaration from applicant * Self-declaration verifies homelessness (residing in shelter or place not meant for human habitation) immediately prior to (i.e.; the day before or same day as) hospital/institution admission date * Worker documents attempt to obtain written third party verification and signs Self-Declaration form * Include self-declaration in participant file |
| **Transitional Housing**  *Note: This only includes TH programs serving homeless persons (per HUD’s definition) and listed in the CoC most recent Housing Inventory Chart submitted to HUD or otherwise recognized by the CoC as part of the CoC inventory (e.g. newly established TH programs)* | Yes, if graduating or timing out from TH program | Written homeless certification | * Obtained signed and dated original Homeless Certification from transitional housing provider * Include Homeless Certification in participant file |
| **OR**  *(if Homeless Certification cannot be obtained)* | |
| Transitional housing provider letter | * Obtain letter from transitional housing provider * Letter: * Is on transitional housing provider letterhead * Identifies transitional housing program * Includes statement verifying current transitional housing occupancy and of participant * Includes statement verifying that applicant is graduating from or timing out of transitional housing program * Includes statement verifying applicant was residing in emergency shelter or place not meant for human habitation immediately prior to transitional housing admission * Is signed and dated by transitional housing provider * Include transitional housing provider letter in participant file |
| **Domestic Violence** | Yes, if assistance is needed to leave domestic violence situation | Self-declaration of homelessness | * Obtain signed and dated original self-declaration from applicant * Worker documents attempt to obtain written third party verification and signs self-declaration form * Include self-declaration in participant file |