

424 Guerrero Street San Francisco, CA 94110 415 621-5661 415 621-5466 fax www.cjcj.org

## Cameo House Resident Self-Certification of Homelessness Explanation

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Applicant Signature	Date	
Program		
Intake Signature	Date	
	Datc	



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## **Homelessness Documentation**

Client Name:		
I.	Type of documentation obtained:	
	Third Party Documentation	
	Staff Observation	
	**Client Self Certification (with certification form)	
II.	Description of the documentation Obtained:	
III.	**If Self Certification is being used, explain the process or attempts made to get third party verification first:	
	Check here if all documentation is in case file	
Agency S	Staff Signature Date	