

<p>Instructions for: Form C1: Third-Party Homeless Certification</p>	 <p>DEPARTMENT OF HOMELESSNESS AND SUPPORTIVE HOUSING</p>
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Description: Form C1 may be used to provide third-party verification of any episode of homelessness experienced by a Client.

Applicability: Form C1 may be filled out and attached to Form B or C to verify any episode of homelessness for any program:

1	Continuum of Care
2	General Fund/LOSP
3	HUD 202/Section 8 PBV
4	MHSA-FSP
5	HSH Fund (formerly Care Not Cash)
6	LIHTC - CTCAC

General Instructions: Form C1 may be completed by Staff to document that the Client was homeless at a given time based on: a service provider, healthcare professional, law enforcement officer verification of one or more encounter ([FAQ 2760](#)); a community member ([FAQ 2759](#)); or an outreach worker observation ([FAQ 2758](#)), and/or institutional paperwork, etc.

Staff should complete and sign the form and upload it into the ONE System. Additional instructions are included on the form.

Note: if the Client is fleeing domestic violence, complete the form using only the minimum information necessary and **only if safety would not be jeopardized.**

For Clients fleeing domestic violence, please consult with your supervisor.