Template letter: Documentation of homeless for persons coming from street, car, or abandoned building.

Date

Coalition for the Homeless of Houston – Harris County
600 Jefferson, Suite 2050
Houston, Texas 77002

To Whom It May Concern:

I am referring Jane Doe to your program for housing assistance. I am Ms. Doe's (fill in relationship, ie: case manager) and have known Jane Doe to be homeless from (date) to (date). Currently she is sleeping on the (streets, car, or abandoned building, fill in which ever is appropriate). (Please give names of streets or parks where they have slept within the last 7 days).

Jane Doe has minimal financial resources (ie: give income source) or no financial resources at this time.

Sincerely,

Staff Name and Signature

Template letter: Documentation of homelessness for persons coming from an emergency shelter.

Date

Coalition for the Homeless of Houston – Harris County
600 Jefferson, Suite 2050
Houston, Texas 77002

To Whom It May Concern:

This letter is to verify that Jane Doe has been residing in our emergency shelter from (date) to (date).

Jane Doe has minimal financial resources (ie: give income source) or no financial resources at this time and is in need of a more supervised, structured and supportive environment. Without your services this individual will be homeless.

Staff Signature

Template Letter: Documentation of homelessness for persons coming from a transitional housing facility for homeless persons.

Date

Coalition for the Homeless of Houston – Harris County
600 Jefferson, Suite 2050
Houston, Texas 77002

To Whom It May Concern:

This letter is to verify that Jane Doe has been residing in our transitional housing facility from (date) to (date) and is being discharged on (date). Upon entering our program Ms. Doe was residing on the streets, emergency shelter, abandoned building (which ever is appropriate). (Or if client was in an institution or evicted from housing, state which type of institution or eviction date).

Jane Doe has minimal financial resources (ie: give income source) or no financial resources at this time and is in need of a more supervised, structured and supportive environment. Without your services this individual will be homeless.

(In this case we need copies of the verification provided to the transitional housing facility upon admission, ie: eviction notices, discharge papers from institution, documentation of person living on streets, shelter or abandoned buildings).

Staff Signature

Template Letter: Documentation of homelessness for persons being evicted from a private dwelling.

Date

Coalition for the Homeless of Houston – Harris County
600 Jefferson, Suite 2050
Houston, Texas 77002

To Whom It May Concern:

This letter is to verify that Jane Doe is a client of our agency and was evicted from her apartment on (date) or will be evicted on (eviction date has to be within 7 days). I am Ms. Doe's (fill in relationship, ie: case manager) and can verify that other efforts have been made to obtain housing for Ms. Doe (please list what efforts have been made).

Jane Doe has minimal financial resources (ie: give income source) or no financial resources at this time. Without your services this individual will be homeless and forced to go into an emergency shelter.

(This type of documentation requires a copy of the eviction notice along with the documentation of homelessness).

Staff Signature

Template Letter: Documentation of homelessness for persons coming from a 1 to 30 stay at an institution such as hospital or treatment facility.

Date

Coalition for the Homeless of Houston – Harris County
600 Jefferson, Suite 2050
Houston, Texas 77002

To Whom It May Concern:

This letter is to verify that Jane Doe is currently homeless and was homeless prior to being admitted into our facility. Ms. Doe was admitted on (date) and is being discharged on (date). (Stay at the institution must be less than 31 days).

Jane Doe has minimal financial resources (ie: give income source) or no financial resources at this time. Without your services this individual will be homeless and forced to go into an emergency shelter.

(This type of documentation requires a copy of the eviction notice along with the documentation of homelessness).

(Any type of documentation as to the clients previous living situation before admission is helpful.)

Staff Signature

Template Letter: Documentation of homelessness for persons coming from a stay at an institution such as hospital or treatment facility for more than 31 days.

Date

Coalition for the Homeless of Houston – Harris County
600 Jefferson, Suite 2050
Houston, Texas 77002

To Whom It May Concern:

This letter is to verify that Jane Doe is currently homeless and has been a participant of our program since (date) and will be discharged by (date, must be within a week).

Jane Doe has minimal financial resources (ie: give income source) or no financial resources at this time. Other attempts to find housing have been made (give list or description of other referrals or attempts) with no success. Without your services this individual will be homeless and forced to go into an emergency shelter.

Staff Signature

Template Letter: Documentation of homelessness for persons coming from a domestic violence situation.

Date

Coalition for the Homeless of Houston – Harris County
600 Jefferson, Suite 2050
Houston, Texas 77002

To Whom It May Concern:

This letter is to verify that Jane Doe is currently homeless and fleeing a domestic violence situation. Jane Doe has minimal financial resources (ie: give income source) or no financial resources at this time.

(Please provide copy of police report or documentation from domestic violence shelter)

Staff Signature