

Shelter Verification

Parent's Name:	SSN:		
Home address:			
City:	Zip:	P	hone:
			early learning program. As a part of ome: (include all adults and children)
Vame:		Relationship to Parent:	
Name:		Relationship to Parent:	
Name:		Relationship to Parent:	
Name:		Relationship to Parent:	
Name:		Relationship to Parent:	
Name:		Relationship to Parent:	
Signature of Parent:			Date:
The adult named above live The current HUD rent is:	s at the address indicat Gross rent adults and (number)	Deductions (number)	_ children live at this address. _ Date:
If I do not live in HUD housing The person named above is above residence; I hereby volume Printed Name: Signature:	s personally known to m erify that the list of pers	ie. I hereby verify ons living at the r	y that the person lives at the residence is complete.