



## Homeless Housing Operations and Services Third Party Verbal Verification Form

When unable to obtain written third party documentation, complete this form to document housing status or income.

- Homelessness – In the narrative include details of what type of place they were staying the night before.
- Chronic Homelessness – In the narrative include details of where they were living and specific months.
- Earned Income – In the narrative include name of employer, pay amount and frequency, average hours worked per week, amount of any additional compensation.
- Other Income – In the narrative include name of income source, income amount, and frequency of income.

Client Name	
HMIS Client Identifier	
Date	
Narrative/Discussion	
Name of Third Party Verifier	
Position/Title	
Telephone	
Organization/Agency	
Case Manager Signature	