



Third Party Documentation of Homelessness

This form shall be completed by people who have first hand knowledge of a participant's homelessness, ie: have observed the participant sleeping in a place not meant for human habitation.

Name of Observer:	Date:
Affiliation or Relationship to participant:	

I have observed _____ experiencing homelessness: sleeping on the street, in a car, tent, abandoned building, park, or other place not meant for human habitation.
 I have observed this person living at the following location:

Please provide information below about when you have observed this person experiencing homelessness. Please complete the table below and initial in the space provided. *For example: If you witnessed this person sleeping in front of the door of your business on May 13, 2019, please list "05/2019" and initial.*

Month/Year	Initial	Month/Year	Initial	Month/Year	Initial	Month/Year	Initial

Signature:
