

AGENCY LETTERHEAD

<Agency Address>

<Date>

Verification of Homelessness - Agency:

This letter is to formally verify the homelessness status of <Client's Name>, born on <Client's Date of Birth>. [He/She/They] has been utilizing our services on <specific date(s)>, during which time the client has reported being homeless. We have been providing support through [mention services provided, e.g., daytime shelter, case management, counseling, classes, groups, etc.].

If you need any other information, please contact <agency/name> at <phone/email>.

Best,

[signature]

<NAME>

<TITLE>

* Make sure to include each date the Client was at your agency reporting they were homeless. This is to obtain an accurate count of how long the Client has been homeless. *