

AGENCY LETTERHEAD

<Agency Address>

<Date>

Verification of Homelessness - Shelter:

This letter is to formally verify that <Client's Name>, born on <Client's Date of Birth>, is currently experiencing homelessness. <Client Name> is currently staying at <Shelter/Facility/Temporary Residential Program> on the dates of <enter all dates client stayed at the shelter>.

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 in your shelter to obtain an accurate count of how long the Client has been homeless. \*