



Perspectives Supportive Housing

APPLICATION INSTRUCTIONS



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| 1. | <p>Disability Verification Form:</p> <p>This form (find attached to application) <u>must be filled out and signed</u> by an appropriate <u>(licensed)</u> person like the applicant's alcohol/drug counselor, therapist, medical physician, social worker, child protection worker, etc. Their Title must be added following their signature. The Applicant must also sign this form (at the top) giving their permission for release of information. [either transfer this form onto your program letterhead or enclose the business card of the person who signed off on the form]</p> |
| 2. | <p>Release of Information Form:</p> <p>This form <u>must be filled out and signed by the applicant</u> and specific names <u>and</u> telephone numbers need to be included.</p> |
| 3. | <p>Homeless Certification Form:</p> <p>This form must be filled out and signed by the referring program staff.</p> |

Thank you for your attention to these special instructions. Please call if you have questions.

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